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TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Assured Aluminum and Screen Inc.			
DOCUMENT NU	MBER:	P10000018830			
The enclosed Artic	cles of Amendment and fe	are submitted for filing.			
Please return all co	orrespondence concerning	his matter to the following:			
		Scott Neely			
		Name of Contact Person			
	Assure	Aluminum and Screen Inc.			
		Firm/ Company			
		263 Ruskin Street			
		Address			
		_ake Mary, FL 32746			
		City/ State and Zip Code			
	sales@assur E-mail address: (to be	edaluminumandscreen.com sed for future annual report notification)			
For further inform	ation concerning this matte	er, please call:			
	Scott Neely	at (407) 535-1639			
Name	e of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a chec	k for the following amoun	made payable to the Florida Department of State:			
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

Articles of Incorporation			<i>7</i> 0 /	St.	
of			The state of the s	1995h	
Assured Aluminum and Screen Inc.					ر ار
(Name of Corporation as cu	rrently filed with	the Florida Dept	. of State)		<i>?</i> _∕ ,
······································	10000018830				
(Document N	lumber of Corporat	ion (if known)		้ารั	
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation		tes, this <i>Florida</i>	Profit Corporation a	adopts the following	ng 💮
A. If amending name, enter the new name	e of the corporatio	<u>n:</u>			
				The new	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "C	orp," "Inc," or "	'Co". A professione	rated" or the	
B. Enter new principal office address, if a		263 Ruskin S	Street		
(Principal office address <u>MUST BE A STR</u>	<u>EET ADDRESS</u>)	Lake Mary, F	L 32746		
		· · · · · · · · · · · · · · · · · · ·		<u>.</u>	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		263 Ruskin S	troot		
(Maning address MAI BE A 1081 01	I ICL BOX)				
		Lake Mary, Fl	L 32746	Arrachites are a second	
D. If amending the registered agent and/or new registered agent and/or the new re			da, enter the name	of the	
Name of New Registered Agent:			<u></u>		
	263 Ruskin S	Street			
New Registered Office Address:					
	Lake Mary		, Florida 32	2746	
	(City)		(Zip Code)		
New Registered Agent's Signature, if char I hereby accept the appointment as registere			ept the obligations oj	f the position.	

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Jeff Andrews	1713 HAVERHILL DR DELTONA FL 32725 US	☐ Add ☑ Remove
#1721	·		
			
(attach ac President FI, 32746	ling or adding additional Artic dditional sheets, if necessary). Scott Neely's address shou	(Be specific) Ild be changed to: 263 Ruskin Stre	et, Lake Mary,
provisio	nendment provides for an exchons for implementing the amenot of applicable, indicate N/A)	ange, reclassification, or cancellation of diment if not contained in the amendme	f issued shares, nt itself:

ment(s)
tatemen
eholder
der
een court