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SECRETURY OF SHAPE





COVER LETTER

TO: Amendment Section Division of Corporations Home Improvement, Inc. P1000007 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lyons Address E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Hityam Jimenez at 954 608 4667

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Glease change the Company

The name of my

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flori	ida Dent. of State)			
Silver Star Home	Improvemen	1, In	c	
(Document Number of Corporation (if kr	iown)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	<i>rida Profit Corporation</i> adop	ots the following	g amendment(s) to	1
A. If amending name, enter the new name of the corporation:				
Silver Star 1,	Inc		The new	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.A.	". A professional corporation	nted" or the al on name must c	bbreviation contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
- -				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
-				
D. If amending the registered agent and/or registered office address	in Florida, enter the name	of the		; ==
new registered agent and/or the new registered office address:	m i fortan, enter the nume	OT THE	基金 72	
Name of New Registered Agent				2-
(Florida street o	ıddress)			So:
New Registered Office Address:	, Florida	7. 6. 1.		7.
(City)		(Zip Code)		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of	of the position.		
Signature of New Registered Age.	nt, 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add.

Example: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change Add Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

amending or adding add attach additional sheets, if		specific)			
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an amendment provides	for an exchange,	reclassif <u>icatio</u>	n, or cancellatio	on of issued sha	res,
rovisions for implementi (if not applicable, indic	ng the amendme cate N/A)	nt if not conta	ined in the amer	ndment itself:	
	,				
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The date of each amendment(s) adoption: 3-22+20/2
Effective date if applicable: 3-22-20/2
(no more than 90) days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 3-22-2012
Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Jose Almeida
(Typed or printed name of person signing)
Prosident
(Title of person signing)

V