P11000014052

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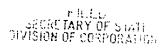
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BANOS WIN	DOWS & DOORS INST. CORP.
DOCUMENT NUMBER: P11000014052	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
HECTOR BANOS	
	Name of Contact Person
BANOS WINDOWS &	DOORS INST. CORP
	Firm/ Company
10829 SW 246TH STRI	BET
	Address
HOMESTEAD, FL 330.	32
-	City/ State and Zip Code
E-mail address: (to	be used for future annual report notification)
·	,
For further information concerning this matter,	please call:
HECTOR BANOS 5	at (305) 224-3533
Name of Contact Person	Area Code & Daytime Telephone Number
% 4.1 (_) %_	ade payable to the Florida Department of State:
■ \$35 Filing Fee Son □\$43.75 Filing Fee	** U\$43.75 Filing Fee & Certified Copy Certificate of Status (Additional copy is enclosed) **Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
1 ananassec, 1 E 32314	Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



BANOS WINDOWS & DOORS INST. CORP

2016 SEP -6 PM 5: 15

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000014052	
(Docume	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the cor	rporation:
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	The new d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDR</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>X</u>)
D. If amending the registered agent and/or registere new registered agent and/or the new registered or	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	istered Agent: I am familiar with and accept the obligations of the position.
Signal	ature 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)

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 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: X.Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Na</u>	<u>me</u>		<u>Addres</u> s	
1) Change	S	JO	EL ALPIZAR PILOTO		2837 SW 33RD AVE	
X Add					MIAMI, FL 33133	
Remove						
2) Change						
Add						
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add				-7-000		
Remove						_

1	adding additional Artical sheets, if necessary).	(Be specific)	'		
***************************************					·
provisions for	nt provides for an exchaing the amenicable, indicate N/A)	ange, reclassifica idment if not con	tion, or cancellar tained in the am	tion of issued sha endment itself:	res,
			AIR-JUL-		
			AIBIUL		

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	•	DIVISION OF CORPORATION
Effective date <u>if a'pplicable</u> :		
	(no more than 90 days after amendment file date)	2016 SEP -6 PM 5: 15
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amend ficient for approval.	lment(s)
	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	r	
	(voting group)	
action was not required.	oted by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder	
08/01/2016 Dated		
Signature	surlef	
selected	rector, president or other officer – if directors or officers have no, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	t been er court
-	Hectol Baros.	
	(Typed or printed name of person signing)	
_	PRESIDENT	
_	(Title of person signing)	