## P11 0000 34334

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Sammy's Window	& Screen Repair Inc			
DOCUMENT NUM	1BER: P11000034334				
	es of Amendment and fee are su	bmitted for filing.			
Please return all cort	respondence concerning this ma	tter to the following:			
	Samuel Burgess				
		Name of Contact Person	1		
Sammy's Window & Screen Repair Inc.					
	·	Firm/ Company			
	784-A NE44th St				
	·	Address			
	Fort Lauderdale Florida 3333	4			
		City/ State and Zip Cod	e		
	annkearns45@aol.com				
	ŭ	sed for future annual report	notification)		
For further informati Susan Hartland	ion concerning this matter, plea		, 5639100		
Susan Hartland at (954) 5639100  Name of Contact Person Area Code & Daytime Telephone		de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street Address			
	mendment Section	Amendment Section			
	vision of Corporations  O. Box 6327	Division of Corporations The Centre of Tallahassee			
	llahassee, FL 32314		N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Sammy's Window & Screen Repair Inc.					
(Name of Corporation	n as currently	filed with the F	lorida Dept. of Sta	te)	
P11000034334					
(Docum	ent Number of	Corporation (if k	(nown)		
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this I	Florida Profit Co	rporation adopts the	e following amendmen	nt(s) to
A. If amending name, enter the new name of the co	rporation:				
				Ti	
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc,' "chartered," "professional association," or the abbre	or "Co". A				
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD					
			•	<del></del>	
				21	
C. Enter new mailing address, if applicable:				:J	
(Muiling address MAY BE A POST OFFICE BO.	<u>V</u> )			<u> </u>	
				- <del>1</del> 9	٠.
				P) 10: 5:	
				<del></del>	
D. If amending the registered agent and/or register new registered agent and/or the new registered of			nter the name of th	01	
Name of New Registered Agent					
	(Florida stre	ret address)		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		·	, Florida		
	ŧ	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Regi	stered Avent				
I hereby accept the appointment as registered agent.		ith and accept th	e obligations of the	position.	
Sima	ture of New Pz	egistered Agent, ij	Cehanaina		
ngna	tare of men Re	дынегей адет, <u>п</u>	changing		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

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	Name	<u>Addres</u> s
1) Change	VP	Shaun Burgess	784A NE44th Street
Add			Fort Lauderdale Fl 33334
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

ach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
	<del> </del>
n amendment provides for an exchange, reclassification, or cancellation of	issued shares,
ovisions for implementing the amendment if not contained in the amendme (if not applicable, indicate N/A)	ent itseif:
(y nor appacame, mateme wa)	
	·
	***

		h April 2021		20 1 1
The date of each amendment(s) ad late this document was signed.	option:			, if other than the
Effective date if applicable:				
		(no more than 90	days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the Dep			able statutory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	( <u>CH</u> )	ECK ONE)		
■ The amendment(s) was/were adopaction was not required.	pted by the i	ncorporators, or b	oard of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf			number of votes cast for the amendment(s)	2021
			ugh voting groups. The following statement vote separately on the amendment(s):	2021 APR 30
"The number of votes east f			• • • • • • • • • • • • • • • • • • • •	
by	(voti	ng group)		FH 10: 55
16th April 2 Dated	021			Ο.
selected	, by an incor	ient or other office rporator - if in the by that fiduciary)	er – if directors or officers have not been hands of a receiver, trustee, or other court	_
:	Samuel Burg	gess		
-	( )	Typed or printed n	ame of person signing)	<del></del>
1	President	SAMUEL	BURGESS	
-	(*	Fitle of person sign	ning)	<del></del>