## P11000063334

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## COVER LETTER

TO: Amendment Section

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Division of Corporations NAME OF CORPORATION: \_ T&W WINDOWS INSTALLATION CORP P11000062324 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: THIAGO CORTELETI Name of Contact Person T&W WINDOWS INSTALLATION CORP Firm/ Company 3441 NW 20TH ST Address COCONUT CREEK/ FL/ 33066 City/ State and Zip Code TCORTELETI@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 954 ) 695-1393

Area Code & Daytime Telephone Number CAMILA CORTELETI Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □S43.75 Filing Fee & □\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation $\mathbf{of}$

T&W WINDOWS INSTALLATION COR	,	
(Name of C	Corporation as currently filed with the Florida Dept. of	of State)
P11000062324		
	(Document Number of Corporation (if known)	<del>/</del>
		/
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this Florida Profit Corporation adop	ots the following amendment(s) t
A. If amending name, enter the new name	of the corporation:	
		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association.  B. Enter new principal office address, if a	,/	ted" or the abbreviation
(Principal office address MUST BE A STRI		<u> </u>
• "	,	
	<i>,</i> *	
		, <u>-</u>
C. Enter new mailing address, if applicab		
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX)	
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	,	
	<u> </u>	
D. If any and discuss the manifestation of account and do	r registered office address in Florida, enter the name	of the
new registered agent and/or the new re		or the
	<del>'</del>	
Name of New Registered Agent	,	
	(Florida street address)	<del></del>
New Registered Office Address:	, F	lorida(Zip Code)
	(CALLY)	(My Chin)
•		
New Registered Agent's Signature, if chan Thereby accept the approintment as registered	d agent. I am familiar with and accept the obligations of	of the position.
The control of the co		, ,
<i>;</i>		;
<i>;</i>	Signature of New Registered Agent, if changing	2810
<i>;</i> '		E I
$f_{\gamma}$		
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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 Doc	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	IHAGO BORTOLOTI SALES	3441 NW 20TH ST
Add			COCONUT CREEK, FL 33066
X Remove			
2) Change	D	HUGO RICARDO M CANUDO	3441 NW 20TH ST
Add			COCONUT CREEK, FL 33066
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Adu			

ach <i>additional shee</i>	g additional Artius, if necessary).	(Be specific)				
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n amendment pro	vides for an excl	hange, reclassif	ication, or car	ncellation of iss	ue <u>d shares,</u>	
ovisions for imple (if not applicable	menting the ame	endment if not o	contained in th	<u>re amendment</u>	<u>itself:</u>	
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The date of each amendment(s)	adoption:	, if other than the
late this document was signed.	2/12/2019	
Effective date <u>if applicable</u> :	2/13/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
12/13/2	018	
Dated		
	D. S	
Signature		
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	THIAGO C CORTELETI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	