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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

the state of the s

NAME OF CORPO	RATION: T&W WINDOWS	INSTALLATION CORP	ORATION
DOCUMENT NUM	D11000063231		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	itter to the following:	
	THIAGO CORTELETI		
		Name of Contact Perso	n
	T&W WINDOWS INSTALI	.ATION CORP	
		Firm/ Company	
	20292 HACIENDA CT		
		Address	· · · · · · · · · · · · · · · · · · ·
	BOCA RATON, FLORIDA	33498	
		City/ State and Zip Cod	le
	TCORTELETI@GMAIL.CO	)M	
	E-mail address: (to be us	sed for future annual repor	t notification)
For further information	on concerning this matter, plea		6951393
	of Contact Person		
Name	of Confact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	sartment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The C 2415 i	Address dment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

T&W WINDOWS INSTALLATION CORPORATION

(Name of Corporation as cu	rrently filed with the Flor	ida Dept. of State)	<del></del>
P11000062324			
(Document Nun	nber of Corporation (if kno	wn)	
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	s, this <i>Florida Profit Corpo</i>	ration adopts the follow	ing amendment(s)
A. If amending name, enter the new name of the corporation	en:		
N/A			Thenew
name must be distinguishable and contain the word "corporatio" "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co "chartered," "professional association," or the abbreviation	o". A professional corpo	porated" or the abbrevia ration name must conta	tion "Corn "
B. Enter new principal office address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS )			
			<del></del>
		<u> </u>	<del></del>
C. Enter new mailing address, if applicable:	N/A		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			· · · · · · · · · · · · · · · · · · ·
		<u>,                                    </u>	<u> </u>
D. If amending the registered agent and/or registered office	address in Florida, enter	the name of the	-5 FINZ: 1,2
new registered agent and/or the new registered office ad	dress:	- <del></del>	2
Name of New Registered Agent N/A	···		<u> </u>
(Flori	ida street address)		<del>_</del>
New Registered Office Address:		, Florida	
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing Registered A	vgent:		
I hereby accept the appointment as registered agent. I am fami	iliar with and accept the ob	ligations of the position.	
Signature of N	ew Registered Agent, if cha	inging	_
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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	D	CAMILA CORTELETI	20292 HACIENDA CT
$\frac{X}{Add}$ Add			BOCA RATON, FL 33498
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			y
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
N/A	
·	

The date of each amendment(s)	06/29/2020	, if other than the
date this document was signed.	auopiton.	If other man the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendmer sufficient for approval.	u(s)
	approved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
06/29/20	20	
Dated	1	
Signature		
selee	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other co- inted fiduciary by that fiduciary)	
арро		
	THIAGO CORTELETI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	