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SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: We Do Shutters, Inc. P11000087747 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jill Johnson Name of Contact Person We Do Shutters, Inc. Firm/ Company 2338 Immokalee Rd. #348 Naples, FL 34110 City/ State and Zip Code wedoshutters@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jill Johnson 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 Fcc Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

FILED

Articles of Amendment

Articles of Incorporation APR 23 PM 5: 06

SECRETARY OF STATES

We Do Shutters, Inc.	TALLAHASSEE, FLORIDA
(Name of Corporation as currently filed with the F	lorida Dept. of State)
P11000087747	
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation "	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addr	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent  Jill Johnson	
2338 Immoka	alee Rd. #348
•	reet address)
New Registered Office Address: Naples	, Florida 34110
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>
I hereby accept the appointment as registered agent. I am familiar	
Signature of New Registered A	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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) X Change	P	Jill Johnson	485 2nd Ave S.
Add			Naples, FL 34102
Remove			
2) Change	D	Scott Mantis	446 Cypress Way E.
$X_{Add}$			Naples, FL 34110
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add		_	<del></del>
Remove			

(Attach additional sheets, if necess	ary). (Be specific)	
N/A		
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provisions for implementing th (if not applicable, indicate )	n exchange, reclassification, or cancellation of issuese amendment if not contained in the amendment itself///)  Shares as follows:	
Jill Johnson	51%	
Scott Mantis	10%	
Jeremy Carlson	15%	
Jeremy Canson		-
	14%	
William M. Zawko William Rhode	14% 10%	

The date of each amendment(s)	adoption: 04/17/2013
Effective date if applicable:	4/17/2013
sifective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were a by the shareholders was/were	dopted 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	st for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated 04/1 Signature	7/2013 Till Johnson President
(By a selec	director, president or other officer – if directors or officers have not been led, by an incorporator – if in the hands of a receiver, trustee, or other court intended fiduciary by that fiduciary)
	Jill Johnson
	(Typed or printed name of person signing)
	President
	(Title of person signing)