## P12 2000 16013

(Re	equestor's Name)	
(Ad	ldress)	
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(C)	ty/State/Zip/Phone	<u> </u>
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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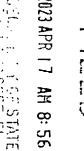
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6/22/23 VW



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

AME OF CORPORA	THE HEI	GHTS ALUMINU	JM, INC	
OCUMENT NUMBE	R:P120000160	73		
he enclosed Articles of	Amendment and fee are su	ibmitted for filing.		
lease return all correspo	ondence concerning this ma	atter to the following:		
	Alisha	Buckman		
_		Name of Contact Perso	n	
	Buckm	an and Buckman,	PA	
_		Firm/ Company		
	2023 C	onstitution Blvd		
_		Address		
	Sarasot	a, FL 34231		
_		City/ State and Zip Cod	le	
	alisha@	buckmanandbuck	kman.com	
_	E-mail address: (to be us	sed for future annual report	t notification)	
or further information c	oncerning this matter, plea	se call:		
Alisha Buc	ekman	. 941	812-9714	
	Contact Person	at (	)ode & Daytime Telephone Number	
			•	
nclosed is a check for the	ie following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	g Address		Address	
		Amendment Section Division of Corporations		
	ox 6327	The Centre of Tallahassee		
Tallaha	ssee, FL 32314		N. Monroe Street, Suite 810	
Amend Divisio P.O. Bo	ment Section n of Corporations ox 6327	Amend Division The C 2415 I	Address Iment Section on of Corporations Centre of Tallahassee	

## Articles of Amendment Articles of Incorporation of

(Name of Corporation as curi	rently filed with the Florida	Dept. of State)	
P12000016073		,	
(Document Numb	ber of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation	on adopts the following am	endment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>		
The Winters Construction Management and Consulting, Inc.		The	new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "I	". A professional corporation	ted" or the abbreviation "C	orp.,"
B. Enter new principal office address, if applicable:		- 150 B	,
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	<del> </del>		7
	<del> </del>		<u>-</u> -
			- M
C. Enter new mailing address, if applicable:		,	ä 🗅
(Mailing address MAY BE A POST OFFICE BOX)		125	.υ— 
		. 1	20
	-		
D. If amending the registered agent and/or registered office		name of the	
new registered agent and/or the new registered office add	<u>lress:</u>		
Name of New Registered Agent			
(Floria	da street address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Code)	<del></del>
New Registered Agent's Signature, if changing Registered Ap I hereby accept the appointment as registered agent. I am famil		tions of the position.	
		, , , , , , , , , , , , , , , , , , ,	
Signature of Ne	ew Registered Agent, if changi	ing	
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (	(11) (e), F.S.		

(Attach additiona	adding additional Ar il sheets, if necessary).	(Be specific)	- · · · · ·			
	<u></u>					
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If an amendmer	it provides for an exc	hange, reclassific	ation, or cancella	ation of issued s	hares,	
provisions for i	mplementing the am cable, indicate N/A)	endment if not co	ntained in the ar	mendment itself	<u>:</u>	
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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)

Example:

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 Do	<u>ec</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) X Change	PVST	_	Cindy Hartman	92 Stanford Road
Add				Venice, FL 34293
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date Department of State's records.	2 will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder actio	n and shareholder
▼ 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 or each voting group entitled to vote separately on the amendment(s):	11
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
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 court	
арро	inted fiduciary by that fiduciary)	
	Cindy Hartman	
	(Typed or printed name of person signing)	
	PVST, D	
	(Title of person signing)	