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(Ac	dress)	
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(Ci	ty/State/Zip/Phone	· #)
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## **COVER LETTER**

6-3-2- 24-5

TO: Amendment Section Division of Corporation	s		
NAME OF CORPORATIO	<sub>N:</sub> Miami Blind	factory, Inc.	
DOCUMENT NUMBER:			
The enclosed Articles of Ame	endment and fee are su	bmitted for filing.	
Please return all corresponde	nce concerning this man	tter to the following:	
Maı	nuel E. Ortega	1	
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	n
<u>M</u> ia	mi Blind Facto	ory, Inc.	
		Firm/ Company	
388	3 W 16 Ave		
		Address	-
Hial	leah, FL. 3301	12	
·		City/ State and Zip Cod	e
manny	ortega1975@a	anl com	
		ed for future annual report	notification)
	`	,	<b>,</b>
For further information conce	erning this matter, pleas	e call:	
Manuel E. Ortega	<b>a</b>	at (305	, 244-3664
Name of Cont			de & Daytime Telephone Number
Enclosed is a check for the fo	illowing amount made p		•
	\$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 A		Street	Address
Amendment Section		Amendment Section	
Division of P.O. Box 6	Corporations		on of Corporations
	527 e, FL 32314		Building excutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Miami Blind Factory, Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P12000027043	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following arits Articles of Incorporation:	mendment(s) to
A. If amending name, enter the new name of the corporation:	
au	he new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevious "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must conword "chartered," "professional association," or the abbreviation "P.A."	eviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	13 JUL-1 PH 8: 46
Name of New Registered Agent Manuel E. Ortega	上。
3883 W. 16 Ave. (Florida street address)	P S S S S S S S S S S S S S S S S S S S
New Registered Office Address: Hialeah , Florida 33012 (City) (Zip Code)	40
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.  Signature of New Registered Agent, if changing	

بالمؤنى فبالباء

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> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	•
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Marietta Ortega	3883 W 16 Ave Hialeah, FL. 33012
X Remove			
2) X Change	<u>P</u>	Manuel E. Ortega	3883 W 16 Ave Hialeah, FL. 33012
Add			
Remove 3) Change	CFO	Enio R. Ortega	6290 NW 173 St. Apl. 137 Hialeah FL. 330156
X Add Remove			
4) Change Add	<del></del>		
Remove	·		
5) Change			·
Add Remove		V	
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
·	
an amendment provides for an avak	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	indment if not contained in the amondment itself:
or o	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
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provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s) adoptio	
Effective date <u>if applicable</u> :	June 19, 2013
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) at for approval.
☐ The amendment(s) was/were approved must be separately provided for each	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	e amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were adopted by action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted baction was not required.	by the incorporators without shareholder action and shareholder
Dated June	19,2013
Signature	and the second s
	r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court
appointed fid	luciary by that fiduciary)
	MAnue / C. ORTES A (Typed or printed name of person signing)
	(Typed or printed name of person signing)
· <u>/</u>	(Title of person signing)
<u></u>	(Title of person signing)