P12000037055

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: COUETING DOCUMENT NUMBER: P 120000	g CAPE/ShoJi Sereens, Inc
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matte	er to the following:
Covering () 2005 Sw Cape Conal	Name of Contact Person 4 DE Shofi Screons, Dwe Firm Company The PL Address Fl- 33991 City/ State and Zip Code USCHSICUS & Company I for future annual report notification)
For further information concerning this matter, please	call:
Light Y. Garcia Name of Contact Person	at (<u>239</u>) <u>597 - 9789</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pay	yable to the Florida Department of State:
	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 3, 2012

LISBEL GARCIA 2005 SW 7TH PL CAPE CORAL, FL 33991

SUBJECT: COVERING CAPE/SHOJI SCREENS, INC.

Ref. Number: P12000037055

We have received your document for COVERING CAPE/SHOJI SCREENS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entire form must be filled out.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 712A00028658

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Articles of Amendment

Articles of Incorporation

COUETING ONDE /Sho Ti SCORENS, Ture	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P120000 37055	
(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 amendrits Articles of Incorporation:	nent(s) 1
A. If amending name, enter the new name of the corporation:	
uf A The n	21v
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain tword "chartered," "professional association." or the abbreviation "P.A"	on
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	9
	7
	3 =
C. Enter new mailing address, if applicable:	, m
(Mailing address MAY BE A POST OFFICE BOX)	O
22	
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:	
Name of New Registered Agent Subon Carria	
SOO 5 Em 17h Pl. (Florida street address)	
(riorida sireci dadress)	
New Registered Office Address: (APF COTOL , Florida 2211 (City) (Zip Code)	
121p Code)	
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	

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	<u>V</u>	Mike Jones	•
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	Kuben Garcia	2005 sw 7th Pl
 Add		·	lape loval
Remove			PL-33991
2) Change			BANKA FORM
Add			
Remove			
3) Change			
Add			
Remove			4-w/
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	
	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
or implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

loption: 11-28-2012
(no more than 90 days after amendment file date)
(CHECK ONE)
opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
for the amendment(s) was/were sufficient for approval
.,
(voting group)
opted by the incorporators without shareholder action and shareholder
-11-2012
Ologo ;
rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)
Lisbel V. Garcia (Typed or printed name of person signing)
(Typed or printed name of person signing) President
(Title of person signing)