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2021 DEC -1 AM 3: 00

SECRETARY OF SHEET

COVER LETTER

Division of Corporations
NAME OF CORPORATION: CTUIT COOST VIRYL AND CUSTOM TYM INC. DOCUMENT NUMBER: P1200072231
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dustin A. Cottle Name of Contact Person Gulf Coast Vinyl and Custom trim Firm/Company 2860 Pine forest ld Contament FU Address Contament FL 32533 City/State and Zip Code Description E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dustin Cottle Name of Contact Person at (856), 441 - 1529 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

of GULF COAST VINYL AND CUSTOM TRIM INC. FILED

2021 DEC -1 AM 3: 00 2 2 60007223) SECRETARY OF STATE TALLAHASSEE, FLORE

(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 amendments Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The ne
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the wor "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(Principal office address <u>MUST BE A STREET ADDRESS</u>)
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:
Name of New Registered Agent Dustin Cottle
28/eu Dine Forest Rd
New Registered Office Address: Cantonnen + Florida 32533
(City) (Zip 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.
Duckin Auxin
Signature of New Registered Agent, if changing

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)

 Δdd

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 <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> Address (Check One) Cantonnens Remove 2) ____ Change __ Add ____ Add Remove 4) Change _ Add _ Remove 5) Change ____ Add Remove 6) ____ Change

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
Dushin Cottle is to be the Only registered
Agent. MR. Charles Kelly is to be Listed
$\alpha s \alpha \gamma \gamma$
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)

The date of each amendment(s) adoption: 1 - 8 - 2 , if other than
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
Dated NWember 18, 2021
Signature (By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
DUSTIN COTTIE
(Typed or printed name of person signing)
Title of person signing) Character

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the