P1300044484

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone #)	
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(Do	cument Number)	
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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: PGT GLOUP IXIC. DOCUMENT NUMBER: P13000044484
DOCUMENT NUMBER: P13000044484
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: Chaisfian Gruffen Name of Contact Person
Firm/ Company 6/18 NW 74th AVE Address Address City/ State and Zip Code CHRISTIAN OP PAT GROUPING. Com E-mail address: (to be used for future annual report notification)
City/ State and Zip Code
CHRISTIAN O POTGROUPING. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call, Chalstian Grayter at 305, 640-8750 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:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

PGT GROUP INC.

(Name of Corporation as currently filed with the Florida Dept. of State)	
P130000 44484	

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation: A. If amending name, enter the new name of the content		adopts the following amendment
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	p," "Inc," or "Co". A professional corpo	
B. Enter new principal office address, if applicab		
(Principal office address <u>MUST BE A STREET AD</u>	DRESS)	—————————————————————————————————————
		
C. Enter new mailing address, if applicable:		22 FE
(Mailing address <u>MAY BE A POST OFFICE Bo</u>	<u></u>	一
		<u> </u>
		30. TS
D. If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent		ame of the
	(Florida street address)	
	(Florida street address)	
New Registered Office Address:	(Civ)	, Florida (Zip Code)
	,	<i>(2.1)</i> * * * * * * * * * * * * * * * * * * *
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with and accept the obligati	ons of the position.
		• •
Sio	nature of New Revistered Avent, if changin	

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:	D'T	Labor D				
X Change	<u>PT</u>	<u>John Do</u>	<u>5¢</u>			
X Remove	$\overline{\Sigma}$	Mike Jo	ones			
X Add	<u>SV</u>	Sally Si				
Type of Action (Check One)	<u>Title</u>	/	Name		Address 3180 Corqi Coral Gables, Fl	1 11
1) Change	SECRE	etary	VICENTE	USUXIA	3/80 Cora,	1 Was
Add					(oral Gables, F)	. 33/1
X Remove						
2) Change		_				
Add						
Remove						
3) Change						
Add						
Remove						
4) Change		_			-	
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change		··				
Add						
Remove						

If amending or adding additional Arti Attach additional sheets, if necessary).	
1 dispersion - 1 and 1 a	
	
	
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If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
<u> </u>	
	
	,

The date of each amendment(s) ad date this document was signed.	option:, if other the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suf	ited by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopaction was not required.	sted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adoption was not required.	ted by the incorporators without shareholder action and shareholder
Dated $\frac{7}{2}$	18/18/
Signature _	Willy
(By a di	ector, predictory of other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	d fiduciary by that fiduciary)
	Christian Grutter
•	(Typed or printed name of person signing)
	VICE-PRESIDENT
	(Title of person signing)