P130000 76102

(Red	questor's Name)	 		
(Add	dress)			
DDA)	dress)			
(City	//State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Nar	ne)		
(Document Number)				
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Amend

AUG 1 4 2019

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	:RBY Sh	utters Inc	
DOCUMENT NUMBER:	P130000	076102	
The enclosed Articles of Amen	<i>dment</i> and fee are su	ibmitted for filing.	
Please return all correspondenc	e concerning this ma	tter to the following:	
	Oscar R	tojas	
		Name of Contact Person	n
	RBY SI	nutters Inc	
		Firm/ Company	
	20351 B	aneer Ave	
		Address	
	Port Cha	ilotte, FL 33952	
		City/ State and Zip Cod	e
	RBY Sh		
C-11	ian address, (to be ti	sed for future annual report	nonneation)
For further information concert	ning this matter, pleas	se call:	
Oscar Rojas		786 at (348-1804
Name of Contac	et Person		de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made	payable to the Florida Depa	ortment of State:
	43.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations			Address
			lment Section
			on of Corporations
P.O. Box 632 Tallahassee,			Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RBY Shutters Inc.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P13000076102	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	73
(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)	
	<u>ိယ်</u>
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	
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, a 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 = ChExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each off 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 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	усе, ата зап <u>РТ</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	Address
1) Change	VP	Orlando Ernesto Perez Vivies	20351 Banner Ave
X Add			Port Charlotte, FL
Remove			33952
2) Change	VP	Oscar Noel Rojas Blanco	20351 Banner Ave
Add			Port Charlotte, FL
X Remove			33952
3) Change			
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

rmach	nding or adding additional Art additional sheets, if necessary).	(Be specific)				
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<u>ran a</u> provi	mendment provides for an exc sions for implementing the am	<u>nange, reclassifi</u> endment if not c	<u>cation, or cancel</u> ontained in the a	<u>nation of issued s</u> mendment itself:	nares,	
(/	f not applicable, indicate N/A)		***************************************		•	
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ot be listed a
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