## P15000090467

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations NAME OF CORPORATION: \_\_\_\_ HURRICANE GARAGE DOORS INC DOCUMENT NUMBER: P15000090467 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JENNIFER ZULUAGA Name of Contact Person HURRICANE GARAGE DOORS INC Firm/ Company 2800 SOMERSET DR SUITE 114J Address LAUDERDALE LAKES, FL 33311 City/ State and Zip Code hgaragedoors@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JENNIFER ZULUAGA Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy 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



## Articles of Amendment to Articles of Incorporation of



## HURRICANE GARAGE DOORS INC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	Ş
P15000090467		76
(Document Number	of Corporation (if known)	<del></del>
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following	amendment(s) t
A. If amending name, enter the new name of the corporation:		
N/A	7	The new
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	on," "company," or "incorporated" or the abb "Co". A professional corporation name must co	reviation
D. Parton and minimal off and dame of small address	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
	<del></del>	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		<del>-</del>
		<del></del>
D. If amending the registered agent and/or registered office ad		
new registered agent and/or the new registered office addre	<u>ss:</u>	
Name of New Registered Agent N/A		
(Florida s	treet address)	
New Registered Office Address:	. Florida	
	(City) (Zip Co	de)
	(Ctţy) (Ztp Co	de)
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent.—I am familia		
і неголу ассорі іне арронитені ах геділіегеа адені.— і ат јатша	with ана ассері іне onigations 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.

Example: 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	VP	ALEXANDER Y TORRES	2403 ANTIGUA CIRCLE #F4
X Add			COCONUT CREEK, FL 33066
Remove			<del></del>
2) Change			
Add			
Remove			<del></del>
3 ) Change		_	
Add			
Remove			
4) Change			_
Add			
Remove			
51 Change		_	
Add			
Remove			
6) Change		_	
Add			
_ Remove			

E. If amending or adding additional Articles (Attach additional sheets, if necessary). (B	genter Change(s) here. Be specific)
N/A	
	<del> </del>
	<del></del>
F. If an amendment provides for an exchang	e, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	nent if not contained in the amendment itself:
N/A	
· · · · · · · · · · · · · · · · · · ·	
	<del></del>
	<del></del>

•	08/17/2017	
The date of each amendment(s) date this document was signed.	) adoption:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	I not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by:	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/17/20 Dated	017	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	JENNIFER ZULUAGA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	