P16 0000 30464

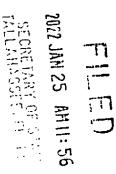
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	OOWS AND ALUMINUM	INC		
DOCUMENT NUM	P16000030464 BER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	MICHAEL D. SMITH				
	Name of Contact Person CERTIFIED WINDOWS AND ALUMINUM INC				
	1572 BREFZEWOOD LAN	Firm/ Company E			
	Palm Bay FLORIDA 32907	Address			
	City/ State and Zip Code				
	321certified@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
MICHAEL SMITH		321 at (914-3360		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

CERTIFIED WINDOWS AND ALUMINUM INC

2022 JAN 25 AH 11: 56

	1055 0411 52 HU 11: 2P
(Name of Corporation as currently	filed with the Florida Dent of State) Y OF THE
P16000030464	TALLAHASSEE, 11
(Document Number of	Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this I s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
If amending name, enter the new name of the corporation: THE CERTIFIED CONTRACTORS INC	
ame must be distinguishable and contain the word "corporation," "c Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	
projection as the desired and the second sec	N/A
Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
 If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address: 	
N/A	
Name of New Registered Agent	
(Florida stre	et address)
N/A	, Florida
New Registered Office Address:	(City) (Zip Code)
ion Desistered Acousts Signature if shanging Degistered Agents	
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	
, and the same of	
Signature of New Ro	egistered 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)

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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) Change	N/A		
Add			
Remove			
2) Change	N/A		
Add			
Remove 3) Change	N/A		
Add			
Remove			
4) Change	N/A		
Add			
Remove	N 1/4		
5) Change	N/A		
Add			
Remove			
6) Change	N/A		
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
			····	
	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
				
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If an amendment provides for an exprovisions for implementing the an	change, reclassific	cation, or cancellation	on of issued shares, ndment itself:	
(if not applicable indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A) A				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

	doption:	, if other than the
date this document was signed. UPo	ON FILING WITH THE DIVISION OF CORPORATIONS	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sharehold	ler action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amen ufficient for approval.	dment(s)
	proved by the shareholders through voting groups. The following 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)	
JANUAR	(22, 2022	
Dated		
Signature	Miller St.	- h
	lirector, president or other officer – if directors or officers have no d, by an incorporator – if in the hands of a receiver, trustee, or oth	
	ted fiduciary by that fiduciary)	ici court
ирроп	MICHAEL SMITH	
	(Typed or printed name of person signing)	<u> </u>
	PRESIDENT, SECRETARY	
	(Title of person signing)	