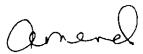
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COVER LETTER

TO: Amendment Section

NAME OF CORPORATION: Apple Auto Glass Inc. P16000041714 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Debra Padula	Division of Cor	porations		,
The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Debra Padula	NAME OF CORPO	ORATION: Apple Auto Glass	Inc.	
Please return all correspondence concerning this matter to the following: Debra Padula	DOCUMENT NUN	IBER: P16000041714		
Debra Padula	The enclosed Article	s of Amendment and fee are su	ibmitted for filing.	
Name of Contact Person Apple Auto Glass Inc Firm/ Company 13460 Rickenbacker Parkway Address Fort Myers, FL 33913 City/ State and Zip Code apag2021@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Debra Padula Name of Contact Person 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 certified Copy (Additional Copy is enclosed) Mailing Address Amendment Section Mailing Address Amendment Section	Please return all corr	espondence concerning this ma	atter to the following:	
Apple Auto Glass Inc Firm/ Company 13460 Rickenbacker Parkway Address Fort Myers, FL 33913 City/ State and Zip Code apag2021@yuhoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Debra Padula 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 certificate of Status) (Additional Copy is enclosed) Mailing Address Amendment Section Street Address Amendment Section		Debra Padula		
Firm/ Company Address Fort Myers, FL 33913 City/ State and Zip Code apag2021@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Debra Padula at (239 851-2009) 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 called Copy (Additional Copy is enclosed) Mailing Address Amendment Section Mailing Address Amendment Section			Name of Contact Persor	<u> </u>
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P.O. Box 6327 The Centre of Tallahassee	Amendment Section Division of Corporations P.O. Box 6327		Amendment Section Division of Corporations	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

2021 APRILED

Apple Auto Glass Inc.			Air a
(Name of Corporation	on as currently filed v	with the Florida Dept. of Sta	ite)
P16000041714			
(Docum	nent Number of Corpor	ration (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida</i>	Profit Corporation adopts the	e following amendment(s) to
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	" or "Co". A profes.		bbreviation "Corp.,"
B. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	V)		
(Maning dauress MAT BE A POST OF FICE BO.	<u></u>		
			
D. If amending the registered agent and/or register	ed office address in F	lorida, enter the name of th	<u>e</u>
new registered agent and/or the new registered of	office address:		
Name of New Registered Agent			
	(Florida street addre	(%s)	
New Registered Office Address:		, Florida	a
	(City)	,	(Zip Code)
	, с.,,,		(inp Coll)
New Registered Agent's Signature, if changing Regi	istered Agent:		
hereby accept the appointment as registered agent. I	l am fàmiliar with and	accept the obligations of the	position.
Siona	ture of New Registered	I Agent if changing	
Signa	aire oj new Kegisierea	i Ageni, ij changing	

Check if applicable

 \Box 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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP	-	Clint Meek	1810 SE 1st Street
X Add				Cape Coral, FL 33990
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		No.		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	nal sheets, if necesso	l Articles, enter ch ury). (Be specific)			
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If an amendm	ont necvides for on	CACHARIZE, TECIASSI	ilcation, or cancena	december 16.	
If an amendme	r implementing the	amendment if not	contained in the an	ienament (tseit:	
provisions for	ent provides for an rimplementing the plicable, indicate N/.	amendment if not 1)	contained in the an	nenument (tseit:	
provisions for	r implementing the	amendment if not	contained in the an	enument (tseit:	
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provisions for	r implementing the	amendment if not	contained in the an	nenument (tisser:	
provisions for	r implementing the	amendment if not	contained in the an	nenument (tsen:	

The date of each amendmen		, if other than the
date this document was signed Effective date if applicable:	April 1, 2021	
	(no more than 90 days after amendment file date	()
	this block does not meet the applicable statutory filing requirement he Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharel	nolder action and shareholder
	re adopted by the shareholders. The number of votes cast for the an ere sufficient for approval.	nendment(s)
	re approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendme	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
April Dated	7, 2021	
Signature		
SG	y a director, president or other officer – if directors or officers have elected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	Debra Padula	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	