## P1600069545

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORDOR	ATION GOVEN	ANT WAD	ows and doors Inc
			5 4114 GOO'S 2715
DOCUMENT NUMBI	er: <b>P16000069</b>	242	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
_	Derling	F Obrego	en
		Name of Contact Person	. , ,
_	COVENANT	WINDOWS Firm/Company	and doors INC
	5428 W	ellcraft dr	•
_	<u> </u>	Address	
	Greenaca	res El 33	1142
_		City/ State and Zip Code	<del>703</del>
ئے_	E-mail address: (to be us		
For further information	concerning this matter, pleas	e call:	
Derline	J.Obregon	at ( <b>561</b>	
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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		Amend Divisio	Address ment Section n of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

to

Articles of Incorporation
Covenant Windows And Doors In
(Name of Corporation as currently filed with the Florida Dept. of State)
1) / ( COCK ) ( 9 CV )
F1600061393
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its <i>Articles of Incorporation</i> :
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.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)
<del></del>
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida street address)
(1 to had sit eet daar essy
New Registered Office Address:, Florida
(Exp Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
on the second se

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	PT Jo	ohn Doe	
X Remove	<u>V</u> <u>M</u>	<u> Mike Jones</u>	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	Oscar O. Gonzalez	5428 WELLCYOFT dr
X Add			Greenacres Fl. 33463
Remove			
2) X Change	<u>CEO</u>	Derling F. Obregon	5428 Wellcraft dr
Add			Greenucres FL 33463
Remove 3) X Change	P	Rocio trivino	5428 wellcraft dr
Add			Greenacres FL 33463
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	<del></del>			
			<u> </u>	<del></del> -	
				<del></del>	·
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			<u> </u>		
f an amendment provides for an exch provisions for implementing the ame	ange, reclassifica	tion, or cancellati	on of issued sh	<u>ares,</u>	
(if not applicable, indicate N/A)	adment it not con	tamed in the ame	ttament itsen.		
			·		
				<del></del>	
				-	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	•
Effective date if applicable: 09-/9	-/6
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does r document's effective date on the Department of	ot meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CH	ECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	phareholders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amer	dment(s) was/were sufficient for approval
by(vol	ng group)
☐ The amendment(s) was/were adopted by the action was not required.	poard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	ncorporators without shareholder action and shareholder
Dated 09-19-16 Signature 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<del></del>
Signature & Deshies	Oburgon.
(By a director, pres	dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court
DERL	Typed or printed name of person signing)
	Typed or printed name of person signing)
	PRESIdent'
<del>-</del>	(Title of person signing)