## P17000031365

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## **COVER LETTER** ,

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TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: ABBS Touch of Gl	lass Inc				
DOCUMENT NU	D17000031376					
The enclosed Artic	cles of Amendment and fee are su	bmitted for filing.				
Please return all co	orrespondence concerning this ma	tter to the following:				
	Joan Abbriano					
		Name of Contact Person	1			
	ABBS Auto Glass Inc					
	Firm/ Company					
	2632 Almond Drive					
	-	Address				
	Holiday, Fl 34691					
	City/ State and Zip Code					
	abbsglass@yahoo.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further inform	ation concerning this matter, pleas	se call: _727	786-7391			
	me of Contact Person	at (	de & Daytime Telephone Number			
	k for the following amount made					
<b>\$35</b> Filing Fee	© \$43.75 Filing Fee & Certificate 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 P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303			

## Articles of Amendment to Articles of Incorporation

ABB\$ Touch of Glass Inc (Name of Corporation as currently filed with the Florida Dept. of State) P170000313652632 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment us Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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." 2632 Almond Drive B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Holiday, FL 34691 C. Enter new mailing address, if applicable: 2632 Almond Drive (Mailing address MAY BE A POST OFFICE BOX) Holiday, Fl 34691 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: Joan Abbriano Name of New Registered Agent 2632 Almond Drive (Florida street address) Holiday New Registered Office Address: . Florida (Cirv) 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.

e of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name 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 = Executive Officer; CFO = Chief Financial Officer. If an officer-director holds more than one title, list the first letter of each office 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. The 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 Ch. 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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	PSTD	Joan Abbriano	2632 Almond Drive
Add			Holiday,FL 34691
Remove			
2) Change	PD	Mona Abbriano	5004 Landstar Way
Add			Tampa, Fl 33647
X Remove	<del></del>	_	
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add		<del></del>	
Remove			

famending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
	_
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(9.14. 2,7.1,	
······································	

The date of each amendment(s) adoption:	, if other tha
iate this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file d	late)
Note: If the date inserted in this block does not meet the applicable statutory filing requirent document's effective date on the Department of State's records.	nents, this date will not be listed a
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was were adopted by the incorporators, or board of directors without sha action was not required.	reholder action and shareholder
The amendment(s) was were adopted by the shareholders. The number of votes east for the by the shareholders was were sufficient for approval.	amendment(s)
The amendment(s) was were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amendous "The number of votes cast for the control of the control of votes cast for the control of votes."	iwing statement ment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
Signature X A D D D  Signature X A D D D  (By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	ve not been or other court
Toan Abbriano (Typed or printed name of person signing)	
_ ,	
President	
(Title of person signing)	