## PICCOHIOS

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SECRETARY STATE

TALLAHASSEE PH MALE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: IRE WINDOW IN	STALLATION INC	
DOCUMENT NUMB			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
•	CARLOS DIAZ GONZALE	Z	
-		Name of Contact Person	n
IRE WINDOW INSTALLATION INC			
-		Firm/ Company	
	4147 BLACKPOWDER WA	• •	
-		Address	
	KISSIMMEE, FLORIDA 34	746	
-		City/ State and Zip Cod	e
CDG1	11982@GMAIL.COM		
	_	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
CARLOS DIAZ GON	ZALEZ	407	717-6291
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	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		Amend Divisio	Address Iment Section on of Corporations
		Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

IRE WINDOW INSTALL ATION INC.

TRE WINDOW INSTALLATION INC			
(Name of Corporation as curr	ently filed with the Florida Dept. of State)		
P17000049908			
(Document Numbo	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006. Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation adopts the follow	ving amendment(s	s) t
A. If amending name, enter the new name of the corporation	:		
	-	71	
name must be distinguishable and contain the word "corpore" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name mu	The new abbreviation street contain the	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		DOT 19	7 = 7
Name of New Registered Agent			
		<u> </u>	
(Floride	a street address)	<u>D</u> 33	
New Registered Office Address:	, Florida		
	(City) (Z	ip Code)	
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili	ent: iar with and accept the obligations of the position	n.	
Signature of Ne	w Registered Agent, if changing	<del></del>	

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 = Treusurer; 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, Treusurer, 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 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	SEC	SOLEIKY SUAREZ CRUZ	5760 SAINT CHRISTOPHER DR
X Add			ORLANDO, FL 32822
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del>-</del>	
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an amendment itself:

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
10 Effective date <u>if applicable</u> :	0/11/2017	٠.
	(no more than 90 days after amendment file date)	<del></del>
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 no Department of State's records.	ot be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast 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	, w	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
10/11/20 Dated Signature	017	
(By a selec	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)	
	CARLOS DIAZ GONZALEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>

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