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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION:	MIRROR, INC		
DOCUMENT NUMBER	R: P17000070001			
The enclosed Articles of A	Amendment and fee are su	sbmitted for filing.		
Please return all correspo	ndence concerning this ma	tter to the following:		
Jua	an Ficano			
		Name of Contact Person	n	
Da	vie Glass & Mirror, Inc.			
_	,	Firm/ Company		
82	14 Griffin Road	Time Company		
		Address		
Da	vie, Fl 33328	, radioa.		
<del></del>		City/ State and Zip Cod	e	
		,		
d,maymo	on@davieglass.com			
	E-mail address; (to be us	sed for future annual report	notification)	
For further information or	oncerning this matter, pleas	se call·		
To Tartie mornation ex	meering this matter, prod.	se can.		
David Maymon		954 at (	8818230	
Name of C	Contact Person	Area Code & Daytime Telephone Nu		
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment of State:	
S35 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			Address	
	ment Section		lment Section	
	n of Corporations	Division of Corporations		
	ox 6327 ssee, FL 32314		n Building Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DAVIE GLASS & MIRROR, INC.

(Name of Corporation	as currently filed with the Florida Dept. of State)
P17000070001	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u> )
	22: 00
	A SE TI
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 new registered agent and/or the new registered off	
Name of New Registered Agent	
Nume of Wen Negagerea Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I as	ered Agent: om familiar with and accept the obligations of the position.
Signatu	re of New Registered Agent, if changing

## 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 Du	<u>oe</u>			
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	D		Jeff Epperley	8	214 Griffin Road	
X Add				<u> </u>	Davie, FI 33328	
Remove				_		
2) Change				_		
Add				_		
Remove				_		
3) Change				_		
Add				_		1
Remove				_		
4) Change				_		
Add				_		••••
Remove				_		
5) Change				_		
Add				_		
Remove				_		
6) Change						
Add		<del></del>		_		
Pamova					· .	

	adding additional Ar al sheets, if necessary)	. (Be specific)			
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				tion of icured charge	
f an amondmo	nt neovidos for an ov	ahanga raalassifi			A.C.
If an amendme	nt provides for an ex-	change, reclassifi	canon, or cancena ontained in the am	endment itself:	<u>:S,</u>
provisions for	nt provides for an eximplementing the an	change, reclassifi nendment if not c	ontained in the am	nendment itself:	<u>:S.</u>
provisions for	implementing the an	change, reclassifi nendment if not c	ontained in the am	nendment itself:	<u>·ss.</u>
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provisions for	implementing the an	change, reclassifi nendment if not c	ontained in the am	nendment itself:	<u></u>

· · · · · · · · · · · · · · · · · · ·	if other than the
date this document was signed.	
Effective date if applicable:	<del></del>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 9/17/018	
Signature Signature	
(By edirector, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
David R. Maymon	
(Typed or printed name of person signing)	<del></del>
Vice President	
(Title of person signing)	