P170000 71693

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(City/State	/Zip/Phone #)
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(Documer	nt Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Runyen Shades, In	ie.	
	BER: P17000071693		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	spondence concerning this ma	itter to the following.	
	Kevin M. Runyen		
	Runyen Shades, Inc.	Name of Contact Person	1
	4542 Clark Road	Firm/ Company	
	Sarasota, FL 34233	Address	
		City/ State and Zip Cod	e
	(grunyen.us E-mail address: (to be us n concerning this matter, pleas	sed for future annual report	notification)
Kevin Runyen		847	875-5562
Name (of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filling Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ling Address indment Section sion of Corporations Box 6327 ahassee, Ft. 32314	Amenc Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

Runyen Shades, Inc.			
(Name o	of Corporation as currentl	y filed with the Florida Dept. of State)	
P17000071693			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new na	ime of the corporation:		
Runyon Wholeshale Shades, Inc.			The new
	ation "Corp," "Inc," or "	n." "company," or "incorporated" or the a Co". A professional corporation name must P.A."	<u></u>
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		⊬ ∵
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST</u>)	OFFICE BOX)		 ;
			Pin 12: 76
D. If any order the modern decoration	al (in Physical and the state of the	6
 If amending the registered agent an new registered agent and/or the new 			
Name of New Registered Agent	Kevin M. Runyen		
мате бу 50 м жедіметей ядет	4542 Clark Road		-
	(Florida str	cet address)	-
	Sarasota	34233	
New Registered Office Address:		(City) , Florida (Zip)	Coder
New Registered Agent's Signature, if c			
i nerchy accept the appointment as regist	erca agent. Tam jamittar s	with and accept the obligations of the position.	
	Se- m	T	_
	Signature of New B	exiered 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: - <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Yame</u>	<u>Addres</u> s
L) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
D. Change			
4) Change			
Add			
Remove			
51 Change			
, Add			
Remove			
6)Change			
Add			
Ramova			

	theets, if necessar	y). (Be specific)	ange(s) here:			
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If an amendment	provides for an c	exchange, reclassi	ification, or cance	llation of issued sha	res,	
provisions for im	plementing the a	amendment if not	ification, or cance contained in the	llation of issued sha imendment itself:	res.	
provisions for im	provides for an opening the a while, indicate N/A	amendment if not	ification, or cance contained in the :	llation of issued sha imendment itself:	res,	
provisions for im	plementing the a	amendment if not	ification, or cance contained in the :	llation of issued sha imendment itself:	res,	
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provisions for im	plementing the a	amendment if not	ification, or cance contained in the :	llation of issued sha	res,	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the ame sufficient for approval.	ndment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendmen	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and sh	archolder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without snareholder action and shareh	older
06/05/20 Dated	19	
Signature	1. M. T	
(By : selec	director, president or other officer – if directors or officers have reted, by an incorporator – if in the hands of a receiver, trustee, or o inted fiduciary by that fiduciary)	
	Kevin M. Runyen	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	