2170009626

(Red	questor's Name)	
(Ádd	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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Articles of Amendment to

Articles of Incorporation

18 JAN 10 AM 8: 45

K AND K WINDOWS AND DOORS INC

		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	T E CA
(<u>Name</u>	of Corporation as currer	tly filed with the Florida Dept. of State)	17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
P17000096626			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following	amendment(s)
A. If amending name, enter the new na	ame of the corporation:	i	
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abi "Co". A professional corporation name must co	breviation
B. Enter new principal office address, if applicable:		66 PICKETTVILLE RD	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	JACKSONVILLE FL 32220	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		66 PICKETTVILLE RD	
		JACKSONVILLE FL 32220	
D. If amending the registered agent an new registered agent and/or the new			
Name of New Registered Agent	RALPH SORRELLS		
<u></u>	66 PICKETTVILLE RD		
	(Florida :	treet address)	
New Registered Office Address:	JACKSONVILLE	Elorida 32220	
		(City) (Zip Co	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: with and accept the obligations of the position.	
		ı	
Galus	Signature of New		
	Signature of New	Registered Agent, if changing	

Example: X Change PT John Doe X Remove V Mike Jones X Add SV Sally Smith	address of each Officer: (Attach additional sheets, Please note the officer/dir P = President; V = Vice if Executive Officer; CFO: held. President, Treasure. Changes should be noted a change. Mike Jones lea Mike Jones, V as Remove.	and/or D if necess vector titl President Chief I r, Directe in the for	irector be ary) be by the fi T= Tree financial or would I llowing m orporation	eing added: Itst letter of the office title: Issurer; S= Secretary; D= Director; TR= Tr Officer. If an officer/director holds more the PTD. anner. Currently John Doe is listed as the Formula South So	director being removed and title, name, and sustee; C = Chairman or Clerk; CEO = Chief han one title, list the first letter of each office PST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,
X Add SV Sally Smith		<u>PT</u>	John Do	<u>e</u>	
Type of Action (Check One)	X Remove	<u>V</u>	Mike Jo	nes	
Change	X Add	<u>SV</u>	Sally Sn	<u>rith</u>	
Change		<u>Title</u>		<u>Name</u>	<u>Addres</u> s
		P	_	RALPH SORRELLS	66 PICKETTVILLE RD
2) Change	Add				JACKSONVILLE FL 32220
Add Remove 3.) Change Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change	Remove				
Remove 3) Change	2) Change				
3) Change Add	Add				
Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change	Remove				
	3) Change		_		
4) Change	Add				· · · · · · · · · · · · · · · · · · ·
AddRemove 5) ChangeAddRemove 6) Change	Remove				
	4) Change				
5) Change	Add				
Add	Remove				
Remove	5) Change		_		
6) Change	Add				
	Remove				
	6) Change				
	_		_		

Remove

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	
	<u> </u>
<u></u>	
	· · ·
F. If an amendment provides for an exchange, reclassification, or cancellation of issu- provisions for implementing the amendment if not contained in the amendment it	ed shares,
(if not applicable, indicate N/A)	, ,,,,,,,
N/A	

	12/07/2017		•
The date of each amendment(s)	adoption:		, if other than the
date this document was signed.	· (4) = -2 0 1 =	• •	; ,
Effective date <u>if applicable</u> :	2/07/2017	ŕ	
mapping.	(no more than	90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l		licable statutory filing requirements.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were a by the shareholders was/were		he number of votes east for the amen	 dment(s)
		arough voting groups. The following o vote separately on the amendment	
	st for the amendment(s) was/w		
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were a action was not required.	dopted by the board of director	rs without shareholder action and sha	reholder
The amendment(s) was/were a action was not required.	dopted by the incorporators wi	thout shareholder action and shareho	lder
12/07/20 Dated	17		
Signature	Cal Varens		
(By a selec	director, president or other of	ficer – if directors or officers have no the hands of a receiver, trustee, or oth y)	
	RALPH SORRELLS		
	(Typed or printed	d name of person signing)	-
	PRESIDENT		
	(Titls	e of person signing)	