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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	FION:I AND D FLOOR	WINDOWS INSTALLAT	ION CORP
DOCUMENT NUMBER			
The enclosed Articles of a	Amendment and fee are so	abmitted for filing.	
Please return all correspor	idence concerning this ma	itter to the following:	
101	RGE YUNIESKY PEREZ	<i>!</i> .	
·		Name of Contact Person	n
		Firm/ Company	
183	2 E 17 ST		
		Address	
HI	ALEAH, FL 33010		
 -		City/ State and Zip Cod	U
YUNIES	KY18@ICLOUD.COM		
	E-mail address: (to be u	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
JORGE YUNIESKY PER	REZ	at (614-8872
Name of Contact Person		Area Co	de & Davtime Telephone Number
Enclosed is a check for the	z fołłowing 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)
Amendr Division P.O. Bo	Address nent Section r of Corporations x 6327 osce, FL 32314	Amend Divisio Clifton	Address Innent Section on of Corporations Building Securive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TAND DIFLOOR WINDOWS INSTALLATION CORP.

(Name of Corporation as currently file	d with the Florida Dept, of State)			
(Document Number of Cor	poration (if known)	·		
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flori</i> its Articles of Incorporation:	ida Profit Corporation adopts the fol	lowing a	mendn	nent(s) to
A. If amending name, enter the new name of the corporation:				
		77.		
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co", word "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name	the abbr must con	eviatic tain tl	ni le
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)				
_				
C. Parama and an included the same of the			- 60	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>	8	Ti
		55		<u> </u>
_			<u>₹</u>	(1)
D. If amending the registered agent and/or registered office address in the registered agent and/or the new registered office address:	n Florida, enter the name of the	LURIU.	?∌ - ⊕	142
Name of New Registered Agent				
(Florida street oa	ldressi			
New Registered Office Address:	, Florida			
Cu_{V}		(Zip Code	(·)	
New Registered Agent's Signature, it changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with a	and accept the obligations of the post.	tion.		
Signature of New Regist	ered 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	PT	<u>John Due</u>	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	SD	YOSIVER LOPEZ AGUILA	3945 SW 89TH AVE APT 401
X Add			MIAMI, Ft. 33165
Веньоче			
2) Change	SD	LUIS SABINA MENDEZ	3031 NW 151 ST
XAdd			OPALOCKA, FL 33054
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: - (Be specific)
ADD- FEIN/EIN Number 83-0694132	
····	
F. If an amendment provides for an excha- provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:date this document was signed.	, if other than
Effective date if applicable:	
(no m	iore than 90 days after amendment file date)
Note: If the date inserted in this block does not meet document's effective date on the Department of State's	t the applicable statutory filing requirements, this date will not be listed as records.
Adoption of Amendment(s) (CHECK C	<u>ONE</u>)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	
☐ The amendment(s) was/were approved by the shareh must be separately provided for each voting group of	
"The number of votes cast for the amendment(s) was/were sufficient for approval
by	<u> </u>
(voting gro.	<i>uρ)</i>
■ The amendment(s) was/were adopted by the board of action was not required.	d directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporaction was not required.	rators without shareholder action and shareholder
Dated	
Signature	70 / 1
selected, by an incorporate appointed fiductary by that	other officer - if directors or officers have not been or if in the hands of a receiver, trustee, or other court (fiduciary)
JORGI YUMESK	Y PEREZ
(Typed c	or printed name of person signing)
PRESIDENT	
_·	(Title of person signing)