P19000023986

(1	Requestor's Name)			
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(1	City/State/Zip/Phone #)			
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	Document Number)			
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Amend

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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SILVERIO WINE	DOWS & DOORS INC		
DOCUMENT NUME	BER: P19000023986			
	of Amendment and fee are so	abmitted for filing.		
Please return all corres	pondence concerning this ma	atter to the following:		
	CARLOS PEREZ			
		Name of Contact Perso	n	
	C PEREZ PROFESSIONAL	. SERVICES INC		
		Firm/ Company		
	4343 W WATERS AVE	r in a company		
		Address		
	TAMPA, FL 33614			
		City/ State and Zip Cod	e	
For further information	E-mail address: (to be used to be	sed for future annual report se call:	notification)	
CARLOS PEREZ		at (249-2300	
Name o	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtiment 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)	
	ing Address		Address	
	ndment Section		Iment Section	
	sion of Corporations Box 6327	Division of Corporations Clifton Building		
	thassee. FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SILVERIO WINDOWS & DOORS INC

(Name of Corporation	on as currently filed	with the Florida [Dept. of Stat	<u>(e</u>)	-	
P19000023986						
(Docum	nent Number of Corpo	pration (if known)				_
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this <i>Florid</i>	a Profit Corporatio	<i>n</i> adopts the	followi	ng amend	dment(s) (
A. If amending name, enter the new name of the co	orporation:					
					The .	
name must be distinguishable and contain the wor. "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	." "Inc," or "Co".					
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>						_
				٠.	21	_
					- 울-	— ,-,
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>			: 	: i	1 1
					23	,
	-				:2 12	— i ' '
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 If amending the registered agent and/or register new registered agent and/or the new registered 		Florida, enter the	name of the		08	
Name of New Registered Agent						
					_	
	(Florida street add	ress)		<u>-</u>	_	
New Registered Office Address:			, Florida	· · · · · · · · · · · · · · · · · · ·		
	(City)			(Zip	(Code)	
New Registered Agent's Signature, if changing Reg						
hereby accept the appointment as registered agent.	I am familiar with an	d accept the obligat	tions of the p	osition.		
					_	
Signe	ature of New Register	ed Agent, if changi	ng			

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 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	VP	JOSHUA REYES JR	12618 LAKE VISTA DR
X Add			GIBSONTON FL 33534
Remove			
2) Change	VP	NATHANIEL REYES	12618 LAKE VISTA DR
X Add			GIBSONTON FL 33534
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f an amendment provides for an exchange, provisions for implementing the amendmen (if not applicable, indicate N/A)					
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(if not applicable, indicate N/A)					es,
	t II not conta	inea in the	<u>amenome</u>	ent itseir:	
		 			
	- .				

The date of each amendment(s	adoption:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	3/14/2019	
Enecure date it appricable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were 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 stateme for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
bv		
· ———	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
03/26/20	019	
DatedSignature	Riverche Dedrice	
(By sele	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 courbinted fiduciary by that fiduciary)	
	RICHARD A SILVERIO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u> </u>