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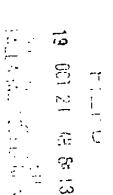
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COVER LETTER

TO: Amendment Section Division of Corporations

A-PANE INC NAME OF CORPORATION:		
DOCUMENT NUMBER:	_ 	
The enclosed Articles of Amendment and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
STEPHEN TYLER MOOR	Е	
A-PANE INC	Name of Contact Persor	1
11214 E MLK BLVD #105	Firm/ Company	
SEFFNER, FL 33584	Address	
	City/ State and Zip Code	
APANEWINDOWCLEANERS@	GMAIL.COM	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, please	se call:	
STEPHEN MOORE	813 at (401-8307
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Clifton Building	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporati	ion as currently filed with the Florid	la Dept. of State)
(<u>rume or corporati</u>	on as content, mee what size i for it	open state,
(Docum	nent Number of Corporation (if known	1)
Pursuant to the provisions of section 607,1006. Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Corpord</i>	ation adopts the following amendment(
A. If amending name, enter the new name of the co	orporation:	
		The new
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". A professional o	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD.		
		<u> </u>
		5 5 五
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)X)	
(, <u>, , , , , , , , , , , , , , , , , , </u>	,
		- 48°
		· ω
D. If amending the registered agent and/or register new registered agent and/or the new registered		the name of the
Name of New Registered Agent		
	(Florida street address)	.
New Registered Office Address:		, Florida
	(City)	(Zip Code)
Now Degistered Agent's Signature if shanging Dea	rictored Agants	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		igations of the position.

Signature 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 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; $C = Chairman\ or\ Clerk$; $CEO = Executive\ Officer$; $CFO = Chief\ Financial\ Officer$. If an officer/director holds more than one title, list the first letter of each C 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. The 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 Che 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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		STEPHEN TYLER MOORE	10130 BLOOMFIELD
			HILLS DR
Add X Remove			SEFFNER, FL 33584
2) Change	PT	JONATHON CHARLES MOORE	10130 BLOOMFIELD
2) Change Add			HILLS DR
Remove			SEFFNER, FL 33584
	VS	SHAUN BURKETH	12021 EMORY OAK LOOP
3) Change X Add			THONOTOSASSA, FL 33592
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

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

	doption:	, if other th
date this document was signed.		
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 D	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed:
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach 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 ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
	19	
Dated	2	
Signature	J	
(By a c	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary) STEPHEN MOORE	
	(Typed or printed name of person signing) PRESIDENT	
	(Title of person signing)	