P190000 75666

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800336802758

11/12/19--01022--023 *+43.75

Amendice

DEC 0 9 Z019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Elite Hurricane Pro	educts, Inc.			
DOCUMENT NUME	BER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Christopher Hege				
,		Name of Contact Perso	n		
	Elite Hurricane Products, Inc.				
•		Firm/ Company			
	1090 Innovation Ave Unit A	119			
•	Address				
	North Port, FL 34289				
		City/ State and Zip Cod	c		
chrish	ege007@gmail.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	e call:			
Christopher Hege		at (812	606-5745		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:		
□ \$35 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)		
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Elite Hurricane Products, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P19000075666 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: _The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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, 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 Doc			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	Matthew R Mativi	2787 Friebrand Rd		
Add X Remove			North Port, FL 34289		
2)Change	D	Timothy E Couch	3231 Sea Haven Ct Unit 4		
Add			North Ft, Myers, FL 33909		
X Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Pamovo					

Attach ada	ditional sheets, if ne	ional Articles, enter cessary). (Be spec	cific)			
					<u> </u>	
		<u>. </u>			-	
						
						
						
<u>.</u> .						
		•				
						
		 ·				-
f an amer	idment provides fo	or an exchange, recl	assification, or ca	ncellation of issue	d shares,	
provision (if no	<u>is for implementing</u> et applicable, indica	g the amendment if $ue N/A$)	not contained in t	he amendment its	<u>elf:</u>	
ζ,		,				
						
			<u>-</u> .			_
				-		
.						
		_				

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after c	mendment file date)
Note: If the date inserted in this document's effective date on the D		y filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of vifficient for approval.	otes cast for the amendment(s)
	proved by the shareholders through voting g each voting group entitled to vote separate	
	for the amendment(s) was/were sufficient for	• •
by	(voting group)	
	(voting group)	
	opted by the board of directors without share	
The amendment(s) was/were ad action was not required.	opted by the incorporators without sharehold	ler action and shareholder
11/7/19		
Dated Signature	Chart	
(By a c selecte	irector, president or other officer – if director, by an incorporator – if in the hands of a reted fiduciary by that fiduciary)	
	Christopher Hege	
	(Typed or printed name of person	on signing)
	President	
	(Title of person sign	ning)