P2000004746

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UI	
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	J. HORNE
	OCT 1 2 2022
	Office Use Only

200395844852

10713722--01002--0121 ##35.00



•	COVER LETTER
TO: Amendment Secti Division of Corpo	
NAME OF CORPOR	ATION: OPV Shutters, INC
	of Amendment and fee are submitted for filing.
Please return all corresp	pondence concerning this matter to the following:
	Orlando Perez Vives
-	Name of Contact Person
-	Firm/ Company
-	22083 Hernando Ave
	Address Porti Charlotte Florida 33952
-	

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Orlando Perez Vives at (<u>365</u>) 766 - 7036 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☑ \$35 Filing Fee

S43.75 Filing Fee & Certificate of Status S43.75 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 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

	rticles of Amendment
Art	ticles of Incorporation $P = P = D$
OFV Sh	MILHENS, INC 2022 OCT 12 PH 4: 36
(<u>Name of Corporation</u> :	as currently filed with the Florida Dept. of State)
2000	0004746 TALLAHASSER
(Document	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sta ts Articles of Incorporation:	tatutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s)
A. If amending name, enter the new name of the corpo	ooration:
	The new
	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ition "P.A."
 <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u> 	<u>Ess</u>)
 Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) 	······
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 	
Name of New Registered Agent	
	(Florida street address)
	(F10F1da Street address)
New Registered Office Address:	, Florida (City) (Zip Code)
	(C i y) $(Z i p C b a e)$
New Registered Agent's Signature, if changing Registe	ered Agent:
	<i>m familiar with and accept the obligations of the position.</i>

Signature of New Registered Agent, if changing

•

Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doe	
<u>X</u> Remove	¥	<u>Mike Jones</u>	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	NP	Yojayma Perez Vives	25385 Sandhill Blud Fl
Add			Punta Gorda, FL 33983
K Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u>-</u>		
Add			
Remove			

If amending or adding additional <u>Art</u> Attach <i>additional sheets, if necessary</i>).	(Be specific)
, <u></u>	
<u> </u>	
.	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y nor appretant, material (y nor appretant)	
······	
,,,,,,,	

.

The date of each amendment(s) a date this document was signed.	idoption:		, if	other than the
Effective date <u>if applicable</u> :		12,2022	1. 1	

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- □ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement* must be separately provided for each voting group entitled to vote separately on the amendment(s).

"The number of votes cast for the amendment(s) was/were sufficient for approval

bv –

(voting group)

Dated ()<lober 12, 2022 Signature

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Orlando Perez Vives (Typed or printed name of person signing)

 \overline{O} 1 1