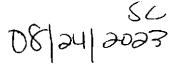
## P23000008107

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: ELITE SLIDING D	OOOR REPAIR INC			
DOCUMENT NUMI	BER: P23000008107				
	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	TAL BILGI				
		Name of Contact Person	1		
	ELITE SLIDING DOOR REPAIR INC				
	Firm/ Company				
	915 NORTH FRANKLIN ST	REET #1203			
		Address	<del></del>		
	TAMPA FL 33602				
		City/ State and Zip Code	<del></del>		
	TALBILGI92@GMAIL.COM	М			
	E-mail address: (to be us	ed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
TAL BILGI		at (			
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	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 Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

## **Articles of Amendment** Articles of Incorporation of

to

ELIETE SLIDING DOOR REPAIR INC			
(Name	of Corporation as currently	filed with the Florida Dept. of State)	
P23000008107			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this i	Florida Profit Corporation adopts the follow	ing amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
	4 14		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbrevial professional corporation name must conti	non Corp., ain the word
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	
	,		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
			ည်
D. If amending the registered agent ar	nd/or registered office addr	ess in Florida, enter the name of the	PH 11: 52
new registered agent and/or the new			- <del> </del>
Name of New Registered Agent	N/A	·- ·- ·-	- ~ 
	(Florida stre	eet address)	_
New Registered Office Address:		. Florida	
		(City) (Zip	Code)
Now Designatured Agent's Signature if a	honging Degistered Agents		
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations of the position	
<del></del>	Signature of New Re	rgistered Agent, if changing	
Chack if applicable	- ·	<del>-</del>	
Check if applicable  The amendment(s) is/are being filed p	ursuant 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 udditional 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>	<u>Name</u>	<u>Addres</u> s	
1) Change	P	BABAYOFF, DAHLIA	915 NORTH FRANKLIN STREET	
Add			1203	
X Remove			TAMPA, FL 33602	
2) Change	P	BILGI, TAL	915 NORTH FRANKLIN STREET	
X Add	<del></del>		# 1203	
Remove 3 ) Change			TAMPA, FL 33602	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add			<del></del>	
Remove				

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)			
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f an amendment provides for an excl	ange, reclassification	on, or cancellation o	of issued shares,	
nrovicione for implementing the ome	ndment it not conta	tined in the amendi	nent itself:	
(if not applicable indicate M/4)				
(if not applicable, indicate N/A)				
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(if not applicable, indicate N/A)				
provisions for implementing the ame (if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

	7/27/2023	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	27/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amend	lment file date)
Note: If the date inserted in this document's effective date on the		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes sufficient for approval.	east for the amendment(s)
	pproved by the shareholders through voting group or each voting group entitled to vote separately on	
"The number of votes ca	st for the amendment(s) was/were sufficient for ap	proval
by		
	(voting group)	
7/27/202	3	
Dated		
Signature	Tottoly	
selec	director, president or other officer – if directors or ted, by an incorporator – if in the hands of a receiv inted fiduciary by that fiduciary)	officers have not been er, trustee, or other court
	TAL BILGI	
	(Typed or printed name of person sig	ning)
	PRESIDENT	
	(Title of person signing)	