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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Storm Pro Window	and Door FL Inc				
DOCUMENT NUMB		<u> </u>				
	of Amendment and fee are sul	omitted for filing.				
Please return all corres	spondence concerning this mat	tter to the following:				
	Shawn Therrien					
	Name of Contact Person					
	Storm Pro Window and Door FL Inc					
	Firm/ Company					
	12839 Ironwood Circle					
	Address					
	Hudson, FL 34667					
		City/ State and Zip Code				
	windowwiz23@gmail.com					
	E-mail address: (to be us	ed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call:				
Shawn Therrien		at (813	310-4658			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check for	or 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment to Articles of Incorporation of

Storm Pro Window and Door FL Inc

(Name of Corporation as current	ntly filed with the Florida Dept. of State)	
P23000047870		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment	(s) to
A. If amending name, enter the new name of the corporation:		
The Door Warehouse Inc	The new	
name must he distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
	1-3	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	·	
	-	
	.,3	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida s	street address)	
New Registered Office Address:	, Florida	
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 familian	nt:	
t nereny accept the appointment as registered agent. I am jamittar	r with and accept the obligations of the pisation.	
Signature of New	Registered Agent, if changing	
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11	1) (e), F.S.	

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after am	andment (ile date)
	(no more man 50 days after am	enament file dates
Note: If the date inserted in this bloodocument's effective date on the Department.		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of director	ors without shareholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of voicient for approval.	tes cast for the amendment(s)
	oved by the shareholders through voting grouch voting group entitled to vote separately	
"The number of votes cast fo	r the amendment(s) was/were sufficient fo	r approval
by		,"
	(voting group)	
Dated 7/1-	123	
Signature	41X	
selected,	ector, president or other officer – if director by an incorporator – if in the hands of a re- d fiduciary by that fiduciary)	
_	Shawn Tr	
	(Typed or printed name of person	n signing)
_	(180	
	(Title of person signing)	

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jor	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. <u>If amendin</u> (Attach <i>addi</i>	g or adding additional Artitional sheets, if necessary).	ticles, enter change(s (Be specific)	<u>) here</u> :		
N/A					
			·		
					
					
				 	
		·			
				-	
F. If an amen	dment provides for an exc	hange, reclassification	on, or cancellation of	issued shares,	
provisions	s for implementing the am applicable, indicate N/A)	endment if not conta	ined in the amendme	ent itself:	
N/A	applicable, indicate WA)				
				<u> </u>	
					-
					-
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