## P23000079263

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Name Change

JUL 1 0 2024 D CUSHING

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: IMPACT WINDO	WS OF MIAMLING		-		
	MBER: P23000079263			-		
	des of Amendment and fee are su	bmitted for filing.				
Please return all ec	orrespondence concerning this ma	tter to the following:				
MARILYN ZORRILLA						
	Name of Contact Person					
	MZ ACCOUNTING SERVIO	CES LLC				
		Firm/ Company				
	175 FONTAINEBLEAU BL	VD 1R13				
Address						
MIAMI, FL 33172						
City/ State and Zip Code						
MARILYN@MZACC.COM  E-mail address: (to be used for future annual report notification)						
	E-mail address, (to be th	sed for future annual report	nouncation)			
For further inform	ation concerning this matter, pleas	se call:				
				. 3	2024 155.4	
MARILYN ZORF		at ( <u>305</u>	)		÷.	, -,
Name of Contact Person		at (305) 551-2795 Area Code & Daytime Telephone Number		ımber	Y 2	con the
Enclosed is a chec	k for the following amount made	payable to the Florida Dep	artment of State:	-<	ထ	i
S35 Filing Fee	© S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	PH 3: 25	
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		0		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

IMPACT WINDOWS OF MIAMLING

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	<del></del>	<del></del>
P23000079263			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation:	s Florida Profit Corporation adopts the foll	owing amendm	ient(s) t
A. If amending name, enter the new name of the corporation:			
OUTDOOR SHADES OF FLORIDA CORP		The ne	ne.
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.4	A professional corporation name must co	viation "Corp.,	**
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A		
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 registered agent and/or the new registered office address.		2024 KAY 28 PM	
Name of New Registered Agent N/H		—ျှ ယှ	
(Florida )	treet address)	25 25	
New Registered Office Address:	Florida	(Zip Code)	
Now Design and Agent's Signature of about in Design and Agent		(rap Cour,	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian		tion.	
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	
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		NIA	
Add			
Remove			W-1000 7 MA
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
① Change			
Add			
Remove			

(Attach <i>additiona</i>	idding additional Artic l sheets, if necessary).	(Be specific)			
VIA					
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lf an amendmer	it provides for an excha	inge reclassificat	ion or cancellation	of issued shares	
provisions for i	implementing the amen				
(if not appl	icable, indicate N/A)				
V/A					
4(1)					· <del></del>
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The date of each amendment() date this document was signed.	s) adoption:	if other than the
Effective date if applicable:		
	(no more than 90 days after amen	dment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filip Department of State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors	without shareholder action and shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes e sufficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting group for each voting group antitled to vote separately or	ns. The following statement is the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for ag	pproval
	(voting group)	.*
05/21/20 Dated Signature(By,	director; prosident or other officer – if directors of	officers have not been
scyc	eted, by an incorporator - if in the hands of a receivinted fiduciary by that fiduciary)	ver, trustee, or other court
	NORBERTO SORIA	
	(Typed or printed name of person sig	gning)
	PRESIDENT	
	(Title of person signing)	