P23000084862

(Re	equestor's Name)	
(Ad	dress)	
`	•	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
	cument Number)	
(50	oument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
		1

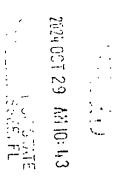




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18/28/24--01837--088 **25.08

10/29/24--01087--007 **25.00





COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations				
NAME OF CORPORATION:	Windo	084862	Design	
The enclosed Articles of Amendi	nent and fee are sub	omitted for filing.		
Please return all correspondence	concerning this mat	ter to the following:		
<u>474</u> W	NW 203 liouni (Address City/ State and Zip Cod	re F1, 33169 le gn 23@gma	
E-ma For further information concernit Kacoli Na S	ng this matter, pleas	e call:		
Name of Contact		at (Area Co	616 - 6597 de & Daytime Telephone Numbe	 er
Enclosed is a check for the follow	wing amount made p	payable to the Florida Dep	partment of State:	
	3.75 Filing Fee & tifficate 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)	-
Mailing Addr Amendment So Division of Co P.O. Box 6327	rporations	Amen Divisi	Address dment Section on of Corporations Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of In	_ ·
Window (view)	Design Corpilia
	tly filed with the Florida Dept. of State)
P23 0000 848	62 2024 OCT 29 AM 10: 44
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following aniendment(s) to
A. If amending name, enter the new name of the corporation:	
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.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	474 NW 203RD TERRACE MIAMI GARDENS, FL
	33169
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	474 NW 203RD TERRACE,
	MIAMI GARDENS, FL, 33169
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	Iress in Florida, enter the name of the
Name of New Registered Agent	, , , , , , , , , , , , , , , , , , ,
New Registered Office Address: 474 NW 2 MIAMI	reet address) 03rd TERRACE, Florida 33169 (Cip) ARDENS (Zip Coxle)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Signature of New F	Registered Agent, if changing

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

Address of each Off (Attach additional st Please note the offic P = President; V = Executive Officer; C President, Treasurer Changes should be r a change, Mike Jone Mike Jones, V as Rei	ficer and/or Direct heets, if necessary) er/director title by t Vice President; T= FO = Chief Finance c, Director would be noted in the followir es leaves the corpor	or being added: he first letter of the office title: Treasurer; S= Secretary; D= Director; TR ial Officer. If an officer/director holds more PTD. ig manner. Currently John Doe is listed as ation, Sally Smith is named the V and S. The	icer/director being removed and title, name, and = Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office held. the PST and Mike Jones is listed as the V. There is ese should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u> <u>Johr</u>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	<u> Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change	_P_	NATALIIA	18335 OCEAN DRIVE
Add		TYRLYCH	MALLANDALE BEACH
Remove 2) Change	<u>S'EU</u> P	KRUNA INC.	FL, 33009 1833 S OCEAN DRIV
Add Add			HALLANDALE BEACH, FL, 33009
Add Remove 4) Change Add	EUP	OLENA STRIPAY	474 NW 203RD TERRACE, Miami
Remove 5) Change Add	P	KAROLINA SABAD	Gardeny, Fl, 33169 OSH 474 NW 203RD TERRACE, MIAMI

____ Remove

6) ____ Change

____ Add

____ Remove

amending or adding additional Art attach additional sheets, if necessary).	(Be specific)
-	. , ,
	
-	
	
n amandment provides for an auch-	and the local section of the local section is a section of the local section of the local section is a section of the local section of
ovisions for implementing the amen	inge, reclassification, or cancellation of issued shares. dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	wastern not contained in the amendment resent.
- 	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	October 11th 2	024 (10.11.2024)
	s block does not meet the applicable statutory filing rec	
document's effective date on the	Department of State's records.	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors withou	it shareholder action and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for sufficient for approval.	or the amendment(s)
• •	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the a	•
"The number of votes of	ast for the amendment(s) was/were sufficient for approva	1
_	urthers	. "
	(voting group)	
Dated	10.11.2024	
Signature	10.11.2024 Glarib	
(By a selec	a director, president or other officer – if directors or office eted, by an incorporator – if in the hands of a receiver, tra- pinted fiduciary by that fiduciary)	istee, or other court
	NATALIIA T	
	(Typed or printed name of person signing)	•
	President (preu	riously)
	(Title of person signing)	0/