P9400086657

(Red	questor's Name)	
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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: South F	Iorida Glazi	ng Inc.
DOCUMENT NUMBER	:: <u>7940000</u>	86657	
The enclosed Articles of A	Imendment and fee are sul	bmitted for filing.	
Please return all correspon	dence concerning this mat	tter to the following:	
	RICKY P	Name of Contact Person	
		rida Glazio Firm/Company	
	2238 SW	J 344h Styco Address	
	Fort Laux	derdale F1. 3 City/ State and Zip Code	33312
	Rickb@50 E-mail address: (to be us	HHOVIDAC ed for future annual report	lazing com
For further information co	ncerning this matter, pleas	e cali:	
Rick Boo	'Acrd ontact Person	at (954 Area Coo	325 - 9330 le & Daytime Telephone Number
Enclosed is a check for the	e following amount made p	payable to the Florida Depa	·
\$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

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South Florida Glazia	00 100
(Name of Corporation as currer	ntly filed with the Florida Dept of State 1: 44
P9400086657	SECRETARY OF STATE
(Document Number	SECRETARY OF STATE of Corporation (if known) LAHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	NA
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	'
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office addre	<u>:89:</u>
Name of New Registered Agent NA	
(Florida s	street address)
New Registered Office Address: HA	, Florida
'	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiant	
Signature of New	Registered Agent, if changing

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: X Change	PT John	Doe	
X Remove	V Mike	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u> </u>	Lance Blosser	1110 pansmore Dr.
Add			Winter Park, F1.32792
Remove			
2) Change		Ruben Auerra	10516 Buck Rd.
Add			orlando, F1. 32817
Remove			
3) Change			
Add			
Remove			
4) Change		<u></u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amer</u> (Attach	mending or adding additional Articles, enter change(s) here: each additional sheets, if necessary). (Be specific)	
N	NA	
provis (ij	an amendment provides for an exchange, reclassification, or cancellation of issued to visions for implementing the amendment if not contained in the amendment in the indicate N/A)	t <u>ed shares.</u> t <u>self:</u>
N	VA	
<u>`</u>	•	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	- The state of the
(no more than 20 days uper amenanem file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4-21-17	
Signature Ruby n. Boshpon	
(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)	
RICKY N. Body Ford (Typed or printed name of person signing)	
PRESIDENT / CEO	
(Title of person signing)	