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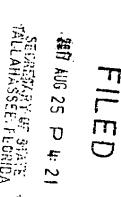
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COVER LETTER

TO: Amendment Section Division of Corporations

West Control

	Par	•	¿ Shades Inc.
DOCUMENT NUMBI	ER:	10000 3142	<u> </u>
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
_	Jan	e E. Klaus	1
-		rane of Contact i ciso	Shades Inc.
	1531	Dugarwood Address	Circle
-	Winter	City/ State and Zip Cod	F1. 32792
	DSSINC E-mail address: (to be us	© ho+mail. sed for future annual report	Com notification)
For further information	concerning this matter, pleas	se call;	
Jane	Klaus	at (<u>407</u>	
Name of	Contact Person	Area Co	de & Daytime Terephone Number
Enclosed is a check for	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		Amend Divisio Clifton	Address Iment Section on of Corporations Building
Tallah	nassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

FILED

Blinds Shutters & St	rades Inc. Filed with the Florida Dentor 35 to P 4: 21
(Name of Corporation as currently	iled with the Florida Depulof 2 fate P 4: 2
P970000 314	125 SECRETARY DE CEASE OF
(Document Number of C	Corporation (if known) LAHASSEE, FEORITA
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2805 Reston 5t. # 104 Melbourne, Fl. 32935
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent Carolyn Klau	u S
Name of New Registered Agent Carolyn Klau 2805 Rpsto	n St. #104
(Florida street	address)
New Registered Office Address: Melbourne	Florida 32935
	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position. NNQ istered 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	<u>PT</u> Johr	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>D</u>	Jane E. Klaus	1531 Sugarwood Cir. Winter Park, Fl.
Add			Winter Park, Fl.
Remove			32792
2) Change	<u>D</u>	Carolyn Klaus	2805 Reston St. # 104
_X Add		/	Melbourne, Fl.
Remove			32935
3) Change	\mathcal{D}	Lindsay Potter	2406 Fatzler Rd.
Add		/	Melbourne, Fl.
Remove			32935
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)	
	41/1	
	N/A	
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	hange, reclassification, or cancellation of issuendment if not contained in the amendment is	self:
rovisions for implementing the amo		
rovisions for implementing the ame (if not applicable, indicate N/A)		
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rovisions for implementing the amo	N/A	
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The date of each amendment(s) adoption: September 1, 2017, if other than date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
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)
(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
Dated $\frac{9/22/17}{\text{Signature}}$ Signature \mathcal{E} . \mathcal{F} laus
(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)
Jane Klous
(Typed or printed name of person signing)
Director (Title of person signing)
(Title of person signing)