P97000069357

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Y 12/5/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ANDERSON AL	UMINUM SUPPLY CO IN	TC				
	1BER: P97000069357						
The enclosed Article	es of Amendment and fee are su	ebmitted for filing.					
Please return all corr	respondence concerning this ma	itter to the following:					
	MEGHAN STOCKER						
		Name of Contact Person	1				
	WALTER'S SANDERS & ASSOCIATES PA						
	Firm/ Company						
	16528 N DALE MABRY HWY						
	Address						
	TAMPA, FL 33618						
	City/ State and Zip Code						
	MEGHAN@WALTERSAN	DERS COM					
	· ·	sed for future annual report	notification)				
For further informat	ion concerning this matter, please	se call:at (961-0094				
Name	e of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check	for the following amount made	payable to the Florida Depa	ortment 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)				
	ailing Address	Street Address					
	nendment Section	Amendment Section					
	vision of Corporations	Division of Corporations					
	O. Box 6327	The Centre of Tallahassee					

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

ANDERSON ALUMINUM SUPPLY CO INC 2022 AUG 23 PM 3: 37 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE P97000069357 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent (l'lorida street address) New Registered Office Address: _, Florida_ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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: X 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	S/T	ERIC ANDERSON	6214 W LINEBAUGH AVE
X Add			TAMPA, FL 33625
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change			
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6) Change			
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If an amend	lment prov	ides far an	evchange	· reclass	sification	or cance	llation of i	iscued shar	*es	
provisions	for implen	enting the	amendm	ent if no	t contain	ed in the	amendme	nt itself:	<u> </u>	
	applicable,	indîcate N/±	1)							
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The date of each amendment(s) add date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements. artment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoptaction was not required.	ted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the americient for approval.	ndment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
AUGUST 11	. 2022	
DatedSignature	m Andusan	
selected.	ector, president or other officer – if directors or officers have no by an incorporator – if in the hands of a receiver, trustee, or of I fiduciary by that fiduciary)	
Ε	OON ANDERSON	
_	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of person signing)	