## 103000150789

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800115531308

01/25/08--01019--014 \*\*\*\*\*\*\*\*\*

Amond

8 JAN 25 AM 8: 3

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF C	ORPORATION: TRINIDADS	S CARPETS INC.	
DOCUMENT	NUMBER: P03000150789		
The enclosed.	Articles of Amendment and fee a	are submitted for filing.	
Please return a	all correspondence concerning th	is matter to the following:	
	FREDDY TRINIDAD		
	(Name	of Contact Person)	
	TRINIDADS CARPETS INC	<b>)</b> .	
·	(Fi	rm/ Company)	<del></del>
	8415 N DIXON AVENUE		
		(Address)	
	TAMPA FL 33604		`
•	(City/ S	tate and Zip Code)	
For further info	ormation concerning this matter,	please call:	
FREDDY TRINIDAD		at ( 813 ) 626-768	37
()	Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a c	heck for the following amount:		
☑ \$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)
Amend Divisio P.O. Bo	g Address ment Section n of Corporations ox 6327 ssee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle

## Articles of Amendment to Articles of Incorporation of

FILED 08 JAN 25 AM 8:30

TRINIDADS CARPETS INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P03000150789
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ARTICLE VI OFFICERS AND DIRECTORS
TO REMOVE JOSE R ZEPEDA AND TO ADD
RODOLFO TRINIDAD
7017 SKYLINE BLVD
TAMPA FL 33619
ALSO TO CORRECT WRONG FEIN ( 20-0481239 ), THE RIGHT NUMBER IS
77-0099619
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A

(continued)

The date of each amendment(s) adoption: 12/19/2007
Effective date if applicable: 12/20/2007
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signature  (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)
FREDDY TRINIDAD
(Typed or printed name of person signing)
OWNER / /
(Title of person signing)

FILING FEE: \$35