

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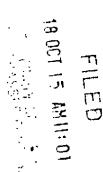
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LINENS & FLOW	ERS DESIGNS INC			
DOCUMENT NUMI	P00000022070				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	EDUARDO VEGA				
	Name of Contact Person				
	LINENS & FLOWERS DESIGN INC				
		Firm/ Company			
	8010 SUNPORT DR SUITE	119			
		Address			
	ORLANDO FL 32809				
		City/ State and Zip Code	e		
For further informatio	E-mail address: (to be use no concerning this matter, please				
	of Contact Person	at (942-4225 de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□S43.75 Filing Fee & Certificate 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 Address		Street	Address		
	endment Section	Amendment Section			
	ision of Corporations	Division of Corporations Clifton Building			
	. Box 6327 ahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LINENS & FLOWERS DESIGNS INC

(Name of Communities and	
(Name of Corporation as Co	urrently filed with the Florida Dept. of State)
P09000022070	
(Document Nu	imber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporat	ion:
E V FAMILY GROUP INC	yThe new
name must be distinguishable and contain the word "corp" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc. word "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation "," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	12220 SABAL PALMETTO PL
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO FL 32824
	2 1 3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12220 SABAL PALMETTO PL
	ORLANDO FL 32824
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office a	
Name of New Registered Agent EDUARDO VEGA	
12220 SABAL PAL	LMETTO PL
(Flo	orida strect address)
New Registered Office Address: ORLANDO	. Florida ³²⁸²⁴
Men registered Office Madress.	

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 Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	EDUARDO VEGA	12220 SABAL PALMETTO PL
X Add			ORLANDO FL 32824
Remove			
2) X Change	VP	LOLIMAR D VEGA	12220 SABAL PALMETTO PL
Add			ORLANDO FL 32824
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
, Add			
Remove			
6) Change			
Add			
Remove			

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f an amendment pro provisions for imple	vides for an exchar	<u>age, reclassificat</u> Iment if not cont	ion, or cancellati	on of issued shares	<u>s.</u>
(if not applicable	:, indicate N/A)	ment is not come			
					
		<u> </u>			
					<u> </u>

	10/01/2018	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	•	
10/0	1/2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, thi partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendm fficient for approval.	ent(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following staeach voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareh	older
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholde	ा
Dated	7/3018	
Signature	West I	
(By a di	rector, president or other officer - if directors or officers have not b	een
selected	I, by an incorporator - if in the hands of a receiver, trustee, or other	court
appoint	ed fiduciary by that (iduciary)	
	EDUARDO VEGA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	