P0900000003219

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Document Number)		
Certified Copies	rtified Copies Certificates of Status	
Special Instructions to Filing Officer:		
,		

Office Use Only



200181241702

05/24/10--01054--006 **35.00

EFFECTIVE DATE

IO MAY 24 AM 9

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Maml. Chg (10 5/10)

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: 3m Design Haus, INC.
DOCUMENT NUMBER: P09000 632 19
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Melissa M. Morris Name of Contact Person
Stormy Sea Studio, Co.
2775 Diane Terrace
Clearwater FL 33759 City/ State and Zip Code
Meltastic @ amail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melissa M. Morris at (727) 456-5287 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment EFFECTIVE DATE to Articles of Incorporation (Name of Corporation as currently filed with the Florida Dept. of State) (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: "company," or "incorporated" or the name must be distinguishable and contain the word "corporation," 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." 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) 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: Name of New Registered Agent: New Registered Office Address: (Florida street address) _, Florida_ (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent:

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			~ ~
	additional sheets, if necessary	rticles, enter change(s) here:). (Be specific)	
provis		exchange, reclassification, or cancella mendment if not contained in the am	

The date of each amendment(s) adoption:05 20 2010
Effective date if applicable: 05 28 200
(no more than 90 days after amendment file date)
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 05 20 2010
Signature <u>Helisse</u> <u>H</u> <u>Houss</u> (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)
Melissa M. Morris (Typed or printed name of person signing)
President
(Title of person signing)