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COVERLETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: A.M. CUSTON	M DESIGN FURNITURE CORP.
The enclosed Articles of Amendment and fee are	
Please return all correspondence concerning this	matter to the following:
Sebastian Marquez	
	Name of Contact Person
A.M. CUSTOM DESIGN	
	Firm/ Company
3890 NW 132nd st Unit	
	Address
	City/ State and Zip Code
	City. State and zap Code
amcustomdesign@hotmail.co	om
E-mail address: (to b	e used for future annual report notification:
For further information concerning this matter, p	Jease call:
Sebastian Marquez	786 , 5396966
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	sde payable to the Florida Department of State;
S35 Filing Fee S43.75 Filing Fee & Certificate of Statu	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314	Street Address Amendment Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, (1, 3230)

Articles of Amendment to Articles of Incorporation of

A.M.	CUSTO	/ DESIGN	FURNITUR	E CORP.
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(Name of Corporation as curr	rently filed with the El	orida Dept. of State)		
P10000054669	per of Corporation (it ke			
	,			
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this <i>Florida Profit Cor</i>	poration adopts the fo	llowing amendn	nent(s) to
A. If amending name, enter the new name of the corporation	<u>u</u>			
name must be distinguishable and contain the word "corpor" (Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," word "chartered." "professional association," or the abbreviati	or "Co". A profession			n
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)				
			· 18	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		·	15 15 15 15 15 15 15 15 15 15 15 15 15 1	FILE
			= =	
D. If amending the registered agont and/or registered office a new registered agent and/or the new registered office add		ter the name of the		
Name of New Registered Agent				
(Florid	la street address)			
New Registered Office Address:		Florida		
	(Cuv)		(Zip Code)	
New Registered Agent's Signature, if changing Registered Ag				
Thereby accept the appointment as registered agent. Tam famil	liar with and accept the	obligations of the pos	ition.	
Cimera and CV	ew Revistered Avent, it			

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, TK = 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 <math>VTD.

Changes should be noted in the following manner. Currently John Doc 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> .lohi	<u>(1)0e</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	Bane	<u>Addres</u> s
1) Change	Preside	Cinthia Marquez	3890 NW 132nd st Unit A
X Add			Opa locka FL 33054
Remove			
2) Change	Preside	Sebastian Marquez	3890 NW 132nd st unit A
Add			Opa locka, FL 33054
X Remove			
3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

••	(Be specific)
<u> </u>	
	
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in amendment provides for an exclusions for implementing the and (if not applicable, indicate Not)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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The date of each amendment(s) adopti- late this document was signed.	96:	, 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 block document's effective date on the Departu	does not meet the applicable statutory filing requirements nent of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of voices cast for the amer or for approval.	ndment(s)
	d by the shareholders through voting groups. The following voting group entitled to vote separately on the amendment	
"The number of votes east for th	ic amendment(s) was/were sufficient for approval	
by	cooling group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and sh	areholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareh	older
08/08/2018		
Dated		
Signature		
(By a directe selected, by	or, project or other officer—if directors or officers have n an propporator—if in the hands of a receiver, trustee, or of discory by that fiduciary)	ot been her court
Seb	astian Marquez	
	(Typed or printed name of person signing)	
Pres	adent	
···	(Title of person signing)	