

P11000007345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

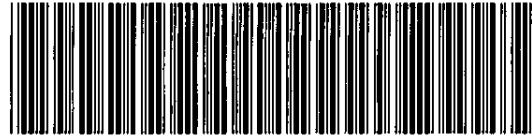
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800213352888

10/31/11--01007--000 \$35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 DEC 14 AM 11:55

*Amend*  
C.COULLIETTE  
DEC 14 2011  
EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** John Cardin Flooring Specialists, Inc.

**DOCUMENT NUMBER:** P11000007345

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Cardin

Name of Contact Person

John Cardin Flooring Specialists, Inc.

Firm/ Company

PO Box 3486

Address

Fort Pierce, Florida 34945

City/ State and Zip Code

jonlin00@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Cardin

Name of Contact Person

at ( 772 )

370-2514  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



**FLORIDA DEPARTMENT OF STATE**  
Division of Corporations

November 1, 2011

**JOHN CARDIN**  
**JOHN CARDIN FLOORING SPECIALISTS, INC.**  
**PO BOX 3486**  
**FT PIERCE, FL 34945**

**SUBJECT: JOHN CARDIN FLOORING SPECIALISTS, INC.**  
**Ref. Number: P11000007345**

We have received your document for JOHN CARDIN FLOORING SPECIALISTS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

If you are changing information for your registered agent in "D", you need to show the changes you are making. If you are not making changes, delete the name from that area.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette  
Regulatory Specialist II

Letter Number: 311A00024850

RECEIVED  
11 DEC -6 AM 8:44  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 6, 2011

JOHN CARDIN  
JOHN CARDIN FLOORING SPECIALISTS, INC.  
PO BOX 3486  
FT PIERCE, FL 34945

SUBJECT: JOHN CARDIN FLOORING SPECIALISTS, INC.  
Ref. Number: P11000007345

We have received your document for JOHN CARDIN FLOORING SPECIALISTS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have to complete the registered agent information in #D of the application in order for me to process your application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette  
Regulatory Specialist II

Letter Number: 011A00027243

RECEIVED

11 DEC 14 AM 9:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

John Cardin Flooring Specialists, Inc.

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

P11000007345

(Document Number of Corporation (if known))

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
FRI DEC 14 AM 11:55

Pursuant to the provisions of section 607.1006, Florida Statute, 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:**

\_\_\_\_\_ 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."

**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)

P.O. Box 3486

Ft. Pierce, FL. 34948

**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: John Cardin


New Registered Office Address: 4205-C Metzger Rd.  
(Florida street address)

Ft. Pierce Fla. Florida 34947  
(City) (Zip Code)

same as business license has not changed

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent in my family with and accept the obligations of the position

  
Signature of New Registered Agent (if changing)

**If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.**

*(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)*

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) _____	_____	_____ _____ _____
2) _____	_____	_____ _____ _____
3) _____	_____	_____ _____ _____
4) _____	_____	_____ _____ _____
5) _____	_____	_____ _____ _____
6) _____	_____	_____ _____ _____

**If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:**

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____



F. **If an amendment provides for an 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)

---

---

---

---

---

---

---

---

The date of each amendment(s) adoption: \_\_\_\_\_

Effective date if applicable: January 16, 2011  
(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 1-16-11

Signature John Cardin  
(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)

John Cardin  
(Typed or printed name of person signing)

President/Incorp.  
(Title of person signing)