P15000018758

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700296257987

03/20/17--01043--029 **35.00

FILED
2017 MAR 20 AM 9: 41
8ECRETARY OF STATE
FALLAHASSEE, FLORID

March 2017

Amendanechs

MAR 22 2017

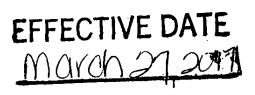
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: BlueInk Draft.	ing & Designs, I	nc.	
DOCUMENT NUMBE	R: <u>P15000078758</u>			
The enclosed Articles of	Amendment and fee are su	abmitted for filing.		
Please return all correspo	ondence concerning this ma	atter to the following	ng:	
		Angelica C	'abrara	
	· · · · · · · · · · · · · · · · · · ·	Name of Cont		
	Blue	Ink Drafting & E	Designs, I	nc.
		Firm/ Con		
<u></u>	· · · · · · · · · · · · · · · · · · ·	2727 N.W. 59	th Street	
		Addre	SS	
	<u> </u>	Miami, Florid		
		City/ State and	Zip Code	
		cutler.angelica@	gmail.co	om
	E-mail address: (to be us	sed for future annu	ial report i	notification)
The first state of the		.,		
For further information co	oncerning this matter, pleas	se call:		
Angelie	ca Cabrera	at (786	
	Contact Person		Area Cod	le & Daytime Telephone Number
Enclosed is a check for th	ne following amount made	payable to the Flor	rida Depai	rtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing	_	
ass rangree	Certificate of Status	Certified Cop	у	☐\$52.50 Filing Fee Certificate of Status
		(Additional co	py is	Certified Copy (Additional Copy
		enciosed)		is enclosed)
Mailin	g Address		Street A	Address
Amend	ment Section	Amendment Section		
Divisio P.O. Bo	Division of Corporations Clifton Building			
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



BlueInk Drafting & Desi		_		
(Name of Corporation as currently	filed with the Florida Dept. of State			-"
P15000078758				
(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the	following	g amend	lment(s) t
A. If amending name, enter the new name of the corporation:				
Atrium Designs, Inc.			_The n	iew
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P	o". A professional corporation nam	r the al	breviat contain	ion the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
(Trinespin office andress <u>Proof BLASTREAL ADDRESS</u>)				- .
		ical)	~	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	SECRE NLL AH	II KAI	71
		AR)	20	
		0. F	2	FE
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	STATE	3,16	; む
Name of New Registered Agent				•
	N/A			
(Florida stree	t address)			
New Registered Office Address:	, Florida_			
(0	City)	(Zip C	ode)	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the po	sition.		
	N/A			
Signature of New Res	eistered Agent. if changing			

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 Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	:	Address
1) Change	SV		Gabriella Ramirez	1629 N.W. 14th Street., Ap.t 402
X Add				Miami, Florida 33125
Remove				
2) Change				
Add				
Remove				-
3) Change				<u> </u>
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change		_ 		
Add				
Remove				
6) Change		_		
Add				
Remove				

	ssary). (Be	specific)				
	N/A					
	1 1/21					·
					 .	<u> </u>
				·		
				<u></u>		_
<u></u>						
					- <u></u>	
				·		
		<u></u>				
				·		
•						
	<u></u> .					
	_				_	
	<u>in exchange,</u> he amendme	reclassificati	on, or cancella	tion of issued s	<u>shares.</u>	
rovisions for implementing th		It is not conta	inica in the am	enginent usen	<u>•</u>	
f an amendment provides for a provisions for implementing the (if not applicable, indicate h	N/A)					
provisions for implementing the (if not applicable, indicate l	N/A)	11				
<u>provisions for implementing th</u>	N/A)	<u>'A</u>				
<u>provisions for implementing th</u>	N/A)	<u>'A</u>				
<u>provisions for implementing th</u>	N/A)	<u>'A</u>				
<u>provisions for implementing th</u>	N/A)	<u>'A</u>				
<u>provisions for implementing th</u>	N/A)	<u>'A</u>				
<u>provisions for implementing th</u>	N/A)	<u>/A</u>				
<u>provisions for implementing th</u>	N/A)	<u>'A</u>				
<u>provisions for implementing th</u>	N/A)	<u>/A</u>				
<u>provisions for implementing th</u>	N/A)	<u>'A</u>				
<u>provisions for implementing th</u>	N/A)	<u>/A</u>				

The date of each amendment(s) adoption:	<i>N/A</i>	, if other than the
date this document was signed.		
Effective date if applicable:	March 27, 2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	s not meet the applicable statutory filing requirements, this date of State's records.	will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by t by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
by	voting group)	
(voting group)	
The amendment(s) was/were adopted by t action was not required.	he board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by taction was not required.	he incorporators without shareholder action and shareholder	
Dated 03/1	6/17	
Signature		
(By a director, p	resident or other officer, if directors or officers have not been	
	ncorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)	
	Angelica Cabrera	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	