# above, or on an attachment with all other like empowered.

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE:

Electronic Signature of Registered Agent

### **Officer/Director Detail :**

Title	Р
Name	MUNIZ, ROSARIO
Address	8191 NW 91 TERR #6
City-State-Zip:	MEDLEY FL 33166

#### DOCUMENT# P11000075648

Entity Name: ART UPHOLSTERY DESIGN INC

# **Current Principal Place of Business:**

8191 NW 91 TERR 6 MEDLEY, FL 33166

### **Current Mailing Address:**

8191 NW 91 TERR 6 MEDLEY, FL 33166

### FEI Number: 45-3088507

### Name and Address of Current Registered Agent:

MUNIZ, ROSARIO 8191 NW 91 TERR 6 MEDLEY, FL 33166 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears 04/30/2017 SIGNATURE: ROSARIO MUNIZ PRESIDETE

Electronic Signature of Signing Officer/Director Detail

#### FILED Apr 30, 2017 Secretary of State CC4258647957

Certificate of Status Desired: No

Date

Date