## 282557

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(Business Entity Name)
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11/27/23--01010--005 \*\*35.00

(12/10/2023)

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: MUECKE-SOBIE	UPHOLSTERY LEATHE	R CO.		
DOCUMENT NUMBER: 282557					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corre	espondence concerning this ma	tter to the following:			
	Asher Sobie				
	Name of Contact Person				
	Muccke-Sobie Upholstery				
		Firm/ Company			
	1008 SW 8th ST				
	Address				
	miami, FL 33130				
		City/ State and Zip Code	2		
	team@sobiesupply.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas				
Asher Sobie		at ( 305	8584384		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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		Amend Divisio The Co 2415 N	Address Iment Section In of Corporations Contre of Tallahassee I. Monroe Street, Suite 810 Insect, FL 32303		

## Articles of Amendment to Articles of Incorporation of

Muecke-Sobie Upholstery Leather Co	5000 11011 7 7
(Name of Corporation as curre	ntly filed with the Florida Dept. of State) 107 27 hil 10: 06
282557	:
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.:	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
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)	
Vienna (4)	
D. If amending the registered agent and/or registered office ac	
new registered agent and/or the new registered office addre	<u>ess:</u>
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
N. D. Carlotte and Division of the control Designation of American	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: ir with and accept the obligations of the position.
, , , , , , , , , , , , , , , , , , ,	
0. 21	D. January C. L. Control
Signature of New	Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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) X Change	P	Asher Sobie	1008 SW 8th St
Add			Miami. FL 33130
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		<del></del>	
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change			<del>_</del>
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· .	
	A 14
<del>_</del> ,	
	· · · · · · · · · · · · · · · · · · ·
<del></del>	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the ame officient for approval.	ndment(s)
• •	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
11/20/2023 Dated	MMi	
(By a diselecte	rector, president or other officer – if directors or officers have not, by an incorporator – if in the hands of a receiver, trustee, or o ded fiduciary by that fiduciary)	
	Asher Sobie	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	