575113

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone) #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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Amend C.COULLIETTE

SEP -1 2011

EXAMINER

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Capital Floor Coverings which
DOCUMENT NUMBER: 575 113
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Patricia A Sowell Name of Contact Person
Capital Ilon Covering Inc
1810 Doomar Dr
Tidel FL 32308
Trush cfc a small angement. con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Patricia Sowe 11 at (850) 656-1986 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\times \text{\$\frac{1}{2}\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)} \$\times \text{\$\frac{1}{2}\$52.50 Filing Fee & Certificate of Status (Additional copy is enclosed)} \$\text{\$\frac{1}{2}\$Certified Copy (Additional Copy is enclosed)} \$\text{\$\frac{1}{2}\$}\$
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

of

Capital Floo	n Cover	rese, Elnc.	
(Name of Corporation as curren	tly filed with the Florid	a Dept. of State)	
.57.5	113		
(Document Numb	er of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corporation adop	ts the following
A. If amending name, enter the new name of t	he corporation:		
			The new
name must be distinguishable and contain th abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	lesignation "Corp," "Inc ssional association," or	c," or "Co". A professional co	" or the 1 SEP - FI
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET			SSI
incipal diffice and case <u>most busy strikus.</u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	TOTAL PROPERTY.
			PH 1: 3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)		RIDA
D. If amending the registered agent and/or renew registered agent and/or the new regist		n Florida, enter the name of th	<u>e</u>
Name of New Registered Agent:	<u> </u>		
New Registered Office Address:	(Florida street d	address)	
		, Florida	
	(City)	(Zip Code)	 :
New Registered Agent's Signature, if changing	Registered Agent:		
l hereby accept the appointment as registered ag		md accept the obligations of the	position.

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
11. P	Dan E Evans	1810 Dosma	Add Add
<u> </u>			Remove
		JallFL 3330	-8
			□ Add
			☐ Remove
			_
			_ 🔲 Add
			_ 🗌 Remove
			_
		•	
	ling or adding additional Articles, enter of ditional sheets, if necessary). (Be specificational sheets)		
(anach aa	——————————————————————————————————————		
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			·
	- <u> </u>		
 -			
	nendment provides for an exchange, recla		
	ons for implementing the amendment if not one of applicable, indicate N/A)	ot contained in the amendment	<u>itself:</u>
(ij no	ої аррисавів, інаісав ім/А)		
	~ · · · · · · · · · · · · · · · · · · ·		
~		**************************************	
·····		Townson, Committee of the State Of Stat	***************************************

The date of each amendment	$t(s)$ adoption: $9 \pm 1 - 11$	
	(date of adoption is required)	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement of 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)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	
	2-1-11 Salruce a Communication of the following a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арр	Patricia A. Sowell	
	(Typed or printed name of person signing)	
	Pres.	
	(Title of person signing)	