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amend

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A. RAMSEY FEB 16 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Hamelin Flooring	g Industries, Inc.					
DOCUMENT NUM	E21000000104						
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.					
Please return all corre	spondence concerning this m	atter to the following:					
	Atilla Babacan, Esq.						
		Name of Contact Perso	on				
	Attorney at Law Atilla Babacan, P.A.						
	<u></u>	Firm/ Company					
	401 East Las Olas Blvd., Suite 1400						
	Address						
	Fort Lauderdale, FL 33301						
		City/ State and Zip Cod	le				
Atil	laEsq@gmail.com						
	'	(to be used for future annua	l report notification)				
For further information Atilla Babacan	n concerning this matter, plea		547 2022				
	· · · · · · · · · · · · · · · · · · ·	at ()				
Name o	f Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:				
S35 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		Divisio The Ce 2415 N	ment Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303				

PROFIT CORPORATION

APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

	F2100000194		نِ ا	. '0	5
	(Document nur	mber of corporation (if known)			Ĭ
Hamelin Flooring Industries	, Inc.			3 3	•
	(Name of corporation as it appe	ears on the records of the Depart	,	7, 7	
Delaware		3. January 4, 2021 (Date author		ي الله	<u>}</u>
(Incorpo	orated under laws of)	(Date author	ized to do business i	n Florida)	
	(4-7 COMPLETE ONI	SECTION II LY THE APPLICABLE CHAI	NGES)		
- 1-	ne name of the corporation, when	n was the change effected under t	the laws of its jurisdi	iction of	
n/a					
(Name of corporation after t not contained in new name of	he amendment, adding suffix "co of the corporation)	orporation," "company," or "inco	orporated," or appro	priate abbreviation	on, i
(If new name is unavailable i	n Florida, enter alternate corpora	ate name adopted for the purpose	of transacting busi	ness in Florida)	
 If the amendment chang 	ges the period of duration, indica	te new period of duration.			
	n/a				
		(New duration)			
7. If the amendment chang	ges the jurisdiction of incorporati	ion, indicate new jurisdiction.			
	()	New jurisdiction)			
new registered agent and/o	or the new registered office add	address in Florida, enter the n dress:	ame of the		
Name of New Registered	d Agent		- ·		
	401 East Las Olas Blv				
		da street address)			
New Registered Office Ad			_, Florida		
		(City)	(Zip Co	rde)	
	gnature, if changing Registere				
I hereby accept the appointm	nent us registered agent. I am fo	amiliar with and accept the oblig	gations of the positio	on.	
Signature	of New Registered Agent, if char	nging			

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

Title/ Capacity	<u>Name</u>	Address	Type of Action
P	Oliver Asel	401 East Las Olas Blvd., Suite 1400	□Add
		Fort Lauderdale, FL 33301	Remove
CFO	Tobias Arnold	401 East Las Olas Blvd., Suite 1400	□Add
		Fort Lauderdale, FL 33301	Remove
sv	Martin K. Multhaupt	401 East Las Olas Blvd., Suite 1400	🖾 Add
		Fort Lauderdale, FL 33301	
			Remove
			□Add
			Remove
10. Attached is a of the applica under the law	certificate or document of similar import, ition to the Department of State, by the Secres of which it is incorporated.	evidencing the amendment, authenticated retary of State or other official having custody	not more than 90 days prior to deliver y of corporate records in the jurisdictio
0	(Signature of a dire a receiver or other	ector, president or other officer - if in the har r court appointed fiduciary, by that fiduciary	nds of
	(Typed or printed name of person signing	(Title of pe	erson signing)

FILING FEE \$35.00