F54500

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SECRETARY OF STATE

Majfi

COVER LETTER

TO: Amenement Section Division of Corporations

NAME OF CORPORATION:	C & M Wood Floors, Inc.
DOCUMENT NUMBER:	F54500
The enclosed Articles of Amendment and	I fee are submitted for filing.
Please return all correspondence concerni	ing this matter to the following:
	Doug Marek, Esq.
	Name of Contact Person
	Doug Marek, P.A.
	Firm/ Company
	•
101F	Pineapple Grove Way, Suite 200
•	Address
	•
	Pelray Beach, Florida 33444
E-mail address: (10	City/ State and Zip Code Jean Ohot mail. Com be used for future annual report notification)
For further information concerning this n	natter, please call:
Doug Marek, Esq.	at (at (561)454-1610
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	ount made payable to the Florida Department of State:
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

:	C & M V	Vood Floors, Ir	1C.	11. 30 S
	(Name of Corporation as cur	ently filed with the	Florida Dept. of Sta	ite)
٠,		F54500 -		
_	(Document Nu	mber of Corporation	(if known)	
	nt to the provisions of section 607.100 ment(s) to its Articles of Incorporation:	06, Florida Statutes	, this <i>Florida Profit</i>	Corporation adopts the following
A. <u>If a</u>	mending name, enter the new name of	of the corporation:		
•	•			
	viation "Corp.," "Inc.," or Co.," or th must contain the word "chartered," "pr			
	ter new principal office address, if ap		1	
(Prince	ipal office address <u>MUST BE A STRE</u>	<u>e i adukess</u>) -		
· .		_	:	
C. Ei	nter new mailing address, if applicable	n:		
	ailing address <u>MAY BE A POST OFF</u>		·	
	•			
			4	
	mending the registered agent and/or			ter the name of the
ne	w registered agent and/or the new reg	<u>istered office addr</u>	ess:	·
	Name of New Registered Agent:	Dean Kerner		
	to the former of the time	· .		
	New Registered Office Address:	(Florida	street address)	
				, Florida
		(City)	(Zi	p Code)
	egistered Agent's Signature, if chang			
1 nerei	by accept the appointment as registered	agent. I am familia	ir with and 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)

Title	Name	<u>Address</u>	Type of Action
PSTD.	Farber, Michael T.	20 NW 3rd Avenue Deerfield Beach, FL 33441	☐ Add ☐ Remove
PSTD	Kerner, Dean	20 NW 3rd Avenue Deerfield Beach, FL 33441	☐ Add ☐ Remove
	·		Add Remove
<u>.</u>			•
	ng.or adding additional Articles, e itional sheets, if necessary). (Be s		
-		,	

13 16			
provision	s for implementing the amendmen applicable, indicate N/A)	reclassification, or cancellation of iss at if not contained in the amendment i	iself:
· · · · · ·			
		······································	
	-		
		t	

The date of each amendment	(s) adoption:	211	O	
	(date of a	doption is requ	ired)	
Effective date if applicable:	(no more than 90 days after	amendment fil	e date)	
•	,	·		
Adoption of Amendment(s)	(CHECK ONE) ·		
The amendment(s) was/wer by the shareholders was/we		s. The number	of votes cast for	the amendment(s)
	e approved by the sharehold d for each voting group entit			
"The number of votes	cast for the amendment(s) wa	as/were sufficie	nt for approval	a page anglés accomacillas
by .	·		,	
	(voting group)			
action was not required. The ameadment(s) was/wer	re adopted by the board of di		,	•
· action was not required.				
Dated May	27, 2010		• .	
: Signature	h		·	
. (By	a director, president or other cted, by an incorporator – if cinted fiduciary by that fiduc	in the hands of		
			:	
	(Typed or print	ean Kerner . ed name of pers		
		PSTD		
	(Title of person sign	nina)		 -