H38691

(Requestor's Name)				
(Addr	ess)			
(Addr	<u> </u>			
(7.00)	C33)			
(City/	State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
- <u>-</u>				
(Busii	ness Entity Nan	ne)		
(Docı	ıment Number)			
Certified Copies	Certificates	of Status		
	 			
Special Instructions to Fil	ling Officer:			

Office Use Only



100361978601

03/15/21--01023--026 **35.00

2021 HAR 15 PH 12: 54
SECRETARY OF STATE



COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Decorators Unlimited DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 625 - 4033 Ext 253

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$52.50 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation .of

The Decorators	Unlimited INCLED
(Name of Corporation as cu	rrently filed with the Florida Dept. of State)
H38691	2021 MAR 15 PM 12: 54
	mber of Corporation (if known) SECRETALY OF STATE TALLAHASSEF, FL
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	TALLAHASSEF, FI s., this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	ion:
Not Applicable	The new
name must be distinguishable and contain the word "corporati	on," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word "P.A."
n. Catanana aringinal office address, if applicable	N/A
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)	<u>N/A</u>
D. If amending the registered agent and/or registered offi	ce address in Florida, enter the name of the
new registered agent and/or the new registered office a	ddress:
Name of New Registered Agent NA	
(Fle	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fa	miliar with and accept the obligations of the position.
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)
Planner and the officer director title by the first letter of the office title.

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 Doc	
X Remove	<u>v</u>	Mike Jones	
_ <u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>\</u>	Jeanne Manetti	4700 Riverside Dive
Add Remove			Suite 100 Palm Beach Gardens, FL 33410
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, i	if necessary).	ticles, enter change(s) here: . (Be specific)
NIA		
<u>[V/T]</u>		
 		
an amandment provid	las for an exc	change, reclassification, or cancellation of issued shares,
rovisions for impleme	nting the am	nendment if not contained in the amendment itself:
(if not applicable, in	idicate N/A)	
V/A		
<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	-	
		

The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required.	d shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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 The Decorators Unlimited Officers	
Signature (By a director, president or other officer f if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
ROBER B. MORIN	
(Typed or printed name of person signing)	
(Ynesigen)	
(Title of person signing)	

· - -·