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Certified Copies	Certificate	s of Status
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Special Instructions to	Filing Officer:	
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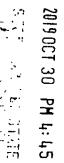
Office Use Only

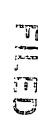


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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	SN'D DECORATO	OR SERVICE, INC	
DOCUMENT NUMBER:			
The enclosed Articles of Amena		ibmitted for filing.	
Please return all correspondence	concerning this ma	atter to the following:	
MARIA	GUERRERO		
Name of Contact Person			
SN'D DE	CORATOR SERVI	ICE, INC	
<del></del>		Firm/ Company	
7766 NW	71ST ST	. ,	
<del></del>		Address	
МІАМІ,	FL 33166		
		City/ State and Zip Cod	e
SNDBONNIE@	AOL.COM		
		sed for future annual report	notification)
For further information concerni	ng this matter, pleas	se call:	
MARIA GUERRERO		305	593-8398 de & Daytime Telephone Number
Name of Contact	Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	wing amount made	payable to the Florida Depa	urtment of State:
	3.75 Filing Fee & rtificate 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 Addr Amendment S Division of Co P.O. Box 6327 Tallahassee, F	retion rporations	Amend Divisie Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ς	N'D	DECOR	ATOR	SERVICE.	INC

Corporation (if known)	
orida Profit Corporation ado	opts the following amendment(s)
	The new
	ated" or the abbreviation
- N/A	3 (3)
N/A	P 17
s in Florida, enter the name	of the
1/A	
( address)	<u> </u>
, F	Florida
ity)	(Zip Code)
	" "company," or "incorporatio". A professional corporation.  A."  N/A  N/A  sin Florida, enter the name

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 = ChiefExecutive 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: $\underline{X}$ 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	<u>Name</u>	<u>Addres</u> s
1) Change	S	PAOLA BELTRAN	7766 NW 71ST ST
X Add	<u></u>	_	MIAMI, FL 33166
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If a</u> r	mending or adding additional	l Articles, enter ch	iange(s	<u>) here</u> :
(Atta	ach additional sheets, if necessa	ury). – (Be specific	)	1.
			2	A
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F. If a	n amendment provides for an	exchange, reclass	ificatio	n, or cancellation of issued shares,
pro	ovisions for implementing the	amendment if no	t conta	ned in the amendment itself:
	(if not applicable, indicate N/	'A')	1.	
		٨	IJR	
		<u> </u>		<del></del>
	<del></del>			

- a description	, if other than the
The date of each amendment(s) adoption date this document was signed.	
date this document was signed. 10/25/2019	
Effective date if applicable	
	more than 90 days after amendment file date)
Note: If the date inserted in this block does not modocument's effective date on the Department of State	eet the applicable statutory filing requirements, this date will not be listed as the 's records.
Adoption of Amendment(s) (CHECK	(ONE)
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	holders. The number of votes east for the amendment(s) val.
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grou	reholders through voting groups. The following statement up entitled to vote separately on the amendment(s):
"The number of votes cast for the amendme	nt(s) was/were sufficient for approval
by	."
(voting g	roup)
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incoraction was not required.	porators without shareholder action and shareholder
10/25/2019	
Dated	
Signature Mana U	1 1
Signature / MARIO	Cultu
(By a director, president	or other officer – if directors or officers have not been
selected, by an incorpor	rator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by	nat inductary)
MARIA GUER	RERO
(Тур	ed or printed name of person signing)
VICE PRESIDI	TMT
<del></del>	(Title of person signing)