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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BAYFRONT FLO	DRAL DECORATORS, INC					
DOCUMENT NUM	DAGAAAA 1 802 1						
The enclosed Article	s of Amendment and fee are se	abmitted for filing.					
Please return all corr	espondence concerning this ma	atter to the following:					
	Dave Roberts						
	Name of Contact Person						
	Dave Roberts CPA, PA						
	Firm/ Company						
	100 North Biscayne Blvd, suite 1108						
	Address						
	Miami, LF 33132						
	City/ State and Zip Code						
For further information	E-mail address: (to be u	sed for future annual report se call:	notification)				
Richard Andrews		at (<u>305</u>	375 - 0300				
Name	Andrews at (305) 375 - 0300 Name of Contact Person Area Code & Daytime Telephone Nu						
Enclosed is a check f	or the following amount made	payable to the Florida Depa	irtment of State:				
□ \$35 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

BAYFRONT FLORAL DECORATORS, INC.

DATE ROSAT FEORAL DICCORATORS, INC.		
(Name of Corporation as current	tly filed with the Florida Dept, of State	<u>-</u>
P00000018924		
(Document Number o	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s)
A. If amending name, enter the new name of the corporation:		
		77
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or ' word "chartered," "professional association," or the abbreviation	"Co". A professional corporation nam	
B. Enter new principal office address, if applicable:		14. 60
(Principal office address MUST BE A STREET ADDRESS)		三 五
		- 第 7 二
		NZ9 PH
C. Enter new mailing address, if applicable:		2 D
(Mailing address MAY BE A POST OFFICE BOX)		5: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3:
		3 0
		<u> </u>
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres:		
Name of New Registered Agent		
(Clarida et	rev address)	
	rectamiress	
New Registered Office Address:	(City) . Florida_	(Zip Code)
	K ay	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	t:	
l hereby accept the appointment as registered agent. I am familiar		osition.
	_	
Signature of New i	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)

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 Doe	
X Remove	\underline{V}	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	Stacy Andrews	100 CHOPIN PLAZA, suite 150
X Add			MIAMI, FL 33131
Remove			
2) Change	D	Emilia Dubon	100 CHOPIN PLAZA, suite 150
X Add			MIAMI, FL 33131
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
(respecific)
igwedge

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)
ing was approxime, marcine (with)

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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1/24/18 Signature Queliul Andrews	
Signature Queliel Andrews	
(By a director, president or other officer—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)	
Richard J Andrews	
(Typed or printed name of person signing)	
President	
(Title of person signing)	