## P01000090819

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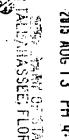
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## COVER LETTER

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: _	EMIL MOVI	ing Si	ystems, INC		
NAME OF CORPORATION: EMIL MOVING SYSTEMS, INC.  DOCUMENT NUMBER: POIOOOO 90819					
The enclosed Articles of Amendm	nt and fee are submitted	for filing.			
Please return all correspondence co	ncerning this matter to t	he following:	:		
	EMIL O. Z	2AVA LA	VACFONSO Ruiz		
	11411	ne or comact	. 1 013011		
	ALTA FINANCE	# INVE	estnent, INC		
	•	Firm/ Compa	any		
	17071 NE 20	DAUE.			
	17071 NE 20	Address			
	teisti, p	33/6	2		
	City	/ State and Zi	ip Code		
ALFONGO A C E-mail	TA FINANCE @ OUT address: (to be used for :	LOOK . COM future annual	report notification)		
For further information concerning	this matter, please call:				
ALFONGO Ruiz  Name of Contact Po		at (3	05 949-70	oy	
Name of Contact Po	rson	A	rea Code & Daytime Teleph	one Number	
Enclosed is a check for the followi	g amount made payable	to the Florid	la Department of State:		
	icate of Status Ce (Ac	3.75 Filing Fortified Copy Iditional copy closed)	Certificate of Sta	tus	
Mailing Addres Amendment Section of Corp P.O. Box 6327	on	1	Street Address Amendment Section Division of Corporations Clifton Building		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

FILED

Articles of Incorporation 115 AUG 13 PM 4: 08

EMIL MOVING	Systems, Ji	V C 30%	MAN OF STATE	
(Name	of Corporation as currently	filed with the	Floridif Depil AlBlace	)
P0100009	0819		. 4	
•	(Document Number of C	Corporation (if	known)	
Pursuant to the provisions of section 60 its Articles of Incorporation:	7.1006, Florida Statutes, this <i>FI</i>	orida Profit C	orporation adopts the f	following amendment(s) to
A. If amending name, enter the new	name of the corporation:			
EZ FURNITUR	e's Installations,	INC		The new
name must be distinguishable and co "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional assoc	gnation "Corp," "Inc," or "Co	o". A professi	or "incorporated" of onal corporation nam	r the abbreviation
B. Enter new principal office address	<i>3</i> 035	NW 15 AV	E	
(Principal office address MUST BE A		3035 NW 15 AVE.		54
C. Enter new mailing address, if app (Mailing address MAY BE A POST			SAME	
D. If amending the registered agent a new registered agent and/or the n		s in Florida, e	nter the name of the	
Name of New Registered Agen	EMIL O.	ZAVALA	<b>×</b>	
	3035 NW 15 AV (Florida street	E. YUA  address)	mi, FL 3312	
New Registered Office Address: Miski		Florida 33/		33/27
	(C	ity)		(Zip Code)
New Registered Agent's Signature, if I hereby accept the appointment as regi		•	he obligations of the po	osition.
	Signature of New Rea	istered Agent	it 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:	e, una sany smi	un, sv as an Aua.	
Example: X Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		SAME	SAME
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change	and the same of th		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			-
6) Change		-	
Add			
Remove			

E. <u>If amendi</u> (Attach <i>ad</i>	ng or add ditional sh	ing addition eets, if nec	onal Articles, ente essary). (Be spe	ecific)
ANY	AND	ALL	LAWFUL	Business
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12021				
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			<u></u>	· 1611
F. If an ame	ndment pr	rovides for	an exchange, rec	classification, or cancellation of issued shares, if not contained in the amendment itself:
(if no	ot applicab	le, indicate	: N/A)	
			1/A	
			_1_	
			м.	
			<b></b>	

, ( - ) · · · · · · · · · · · · · · · · · ·	12/10/2	2015	
The date of each amendment(s) adopt date this document was signed.			, if other than the
Effective date if applicable:	08/10/2015	rs after amendment file date)	
	(no more than 90 day	rs after amendment file date)	
<b>Note:</b> If the date inserted in this block document's effective date on the Depart		statutory filing requirements, this date w	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders was/were suffici		ber of votes cast for the amendment(s)	
☐ The amendment(s) was/were approve must be separately provided for each			
"The number of votes cast for t	he amendment(s) was/were suff	ficient for approval	
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were adopted action was not required.	l by the board of directors without	out shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.			
DatedO	P/10/2015 Fuil O. ZAVAL	-	
Signature	mil O. ZAVAL		
(by a direct	or, president of other officer – i	if directors of officers have not been	
	an incorporator – if in the hand iduciary)	ds of a receiver, trustee, or other court	
аррописа 1			
	EMIL O. Z	LAVALA	
	(Typed or printed name	of person signing)	
	PRESIDENT		
	(Title of per	son signing)	