PD1000120499

(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: microtex l	INC			
	BER: PO10001				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:	,		
	barek kalev				
		Name of Contact Person	1		
	microtex inc				
		Firm/ Company		_	
	5301 nw 161 street	, ,			
		Address			
	miami garden fl 33014				
		City/ State and Zip Cod	ę	_	
steve	@microtexfabric.com	,			
	E-mail address: (to be us	sed for future annual report	notification)		
	,	1	,		
For further information	on concerning this matter, pleas	se call:			
steve barek		at (305	_) 6227135		
Name	of Contact Person	Area Co	de & Daytime Telephone Numb	er	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	■\$43.75 Filing Fec & 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)		
Am	iling Address endment Section ision of Corporations	Street Address Amendment Section Division of Corporations			
	. Box 6327	Clifton Building			
Tal	lahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Arti	icles of Amendment
Artic	to les of Incorporation
	of Cartain State of S
MICROTEX INC	200
(Name of Corporation as	currently filed with the Florida Dept. of State)
P01000120499	بن بن
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Status Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:
MICROTEX HOME TEXTILE INC	The new
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
	5301 NW 161 STREET
 Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u> 	MIAMI GARDEN FL 33014
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
new registered agent and/or the new registered other	E AUDITESS.
Name of New Registered Agent	
	Florida street address)
New Registered Office Address:	, Florida
THE REGISTERED OFFICE MUNICISM.	(City) (Zip Code)
	•
New Registered Agent's Signature, if changing Registere	
I hereby accept the appointment as registered agent. I am	familiar 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)

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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_		 _	
Add				_	
Remove				-	
2) Change					
Add			•	-	· · · · · · · · · · · · · · · · · · ·
Remove				-	
3) Change				 _	
Add				_	
Remove				_	
4) Change Add				-	
Remove				-	A - 18-51
5) Change	•				
Add		<u> </u>		 =	
Remove				•	
6) Change				 -	
Add				-	
Pemove					

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)	•		(Be specific)						
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	1/26/2017	
The date of each amendment(s) a		, if other than the
date this document was signed.		
	0/2017	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes case	t for the amendment(s) was/were sufficient for approval	
by	,,,	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
1/26/2017 Dated		•
Signature		
	director, president or other officer - if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
арроп	med fiductary by that fiductary)	
	KALEV BAREK	
	(Typed or printed name of person signing)	
	PRESIENT	
,	(Title of person signing)	