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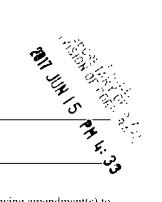
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MICROTEX HON	ME TEXTILE INC	
DOCUMENT NUMB			
	of Amendment and fee are st	abmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	KALEV BAREK		
•		Name of Contact Perso	n
	MICROTEX HOME TEXTI	LE	
		Firm/ Company	
	5301 NW 161 STREET	• •	
		Address	
	MIAMI GARDEN FL 3301-	1	
•		City/ State and Zip Cod	e
STEV	E@MICROFLOCK.COM		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
STEVE BAREK		305 at (de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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		Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to $_{\rm c}$. Articles of Incorporation of



MICROTEX HOME TEXTILE INC

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P01000120499	Ę.
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, th its Articles of Incorporation:	as Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporate	EX, [NC. The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	SAME
C. Enter new mailing address, if applicable: (Muiling address <u>MAY BE A POST OFFICE BOX</u>)	SAME
D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office address SAME	2581
Name of New Registered Agent	
SAME	
(Florida	street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
элсэсгү месергин арранатын из regisurea agem r am jamuaa	r wan and accept me oraigitions ој the position.
Signature of New	v 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

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change				
Add				
Remove				
2) Change			/	
Add			/	
Remove		\ \1\		
3.) Change			<u> </u>	
Add		y /		
Remove				
4) Change		/		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Ayd				
Remove				

	lditional Articles, enter change(s) here: f necessary). (Be specific)	
f an amendment provide	es for an exchange, reclassification, or cancellation of i	icened chares
provisions for implement (if not applicable, ind	ting the amendment if not contained in the amendmen	nt itself:
	<u> </u>	
	- / \(\)	

The date of each amendment(s) adoption:	, if other than th
date this document was signed. 05/17/2017 Effective date if applicable:	
(no more than 90 days after amend	dment file date)
Note: If the date inserted in this block does not meet the applicable statutory filindocument's effective date on the Department of State's records.	ng requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes of by the shareholders was/were sufficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups must be separately provided for each voting group entitled to vote separately on	
"The number of votes east for the amendment(s) was/were sufficient for app	proval
by	·"
☐ The amendment(s) was/were adopted by the board of directors without sharehold action was not required.	er action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder ac action was not required. Dated	r officers have not been er, trustee, or other court
Clyped or protest home of person six	HARW UTTER
(Typed or printed name of person signal $\mathcal{R}(\mathcal{L}, \mathcal{L})$	EN)
(Title of person signing)	