## P0200000483

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amond C.COULLIETTE FEB 1 7 2009

**EXAMINER** 

## **COVER'LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EXQUISITE CARPET & INTERIORS, INC		
DOCUMENT NUMBER: P02000004	183	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
	ER T. HOLBERT Contact Person)	
(Name of	Contact Terson)	
EXQUISITE O	CARPET & INTERIORS, INC	
(Firm	/ Company)	
	BOX 380126	
(A	Address)	
· · · · · · · · · · · · · · · · · · ·	CK FL 33938-0126	
(City/ Stat	te and Zip Code)	
For further information concerning this matter, pl	lease call:	
WALTER T. HOLBERT	at ( <u>941</u> ) <u>625-5666</u>	
(Name of Contact Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for the following amount ma-	de payable to the Florida Depar	tment 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	le.

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as cu	rrently filed with the	<u>ne Fiorida Dept. 01 St</u>	ate)
P0	2000000483		B
(Document N	umber of Corporation	on (if known)	
Pursuant to the provisions of section 607.1 following amendment(s) to its Articles of Inc.		es, this <i>Florida Profit</i>	t Corporation adopts the
A. If amending name, enter the new name	of the corporation	<u>ı:</u>	
The new name must be distinguishable "incorporated" or the abbreviation "Corp. "Co". A professional corporation no association," or the abbreviation "P.A."	," "Inc.," or Co.,	" or the designation	"Corp," "Inc," or
B. Enter new principal office address, if a			·
(Principal office address <u>MUST BE A STRI</u>	EET ADDRESS )		T;
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)	FICE BOX)		09 FEB 13 AM II: 18 SECRETARY OF STATE LLAHASSEE FLORIDA
D. If amending the registered agent and/o new registered agent and/or the new re			ter the name of the
Name of New Registered Agent:	WALTER T. HOL		_
New Registered Office Address:	9 SHY STREET (Florid	la street address)	_
	PORT CHARLO	ΠΕ (City)	, Florida <u>33954</u> (Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registed position.	red agent. I am f		ept the obligations of the

		rs, enter the title and name of each officer	
	ind title, name, and address of ditional sheets, if necessary)	each Officer and/or Director being added	<u>:</u>
Title	Name	Address	Type of Action
<del></del>	<del></del>	<del></del>	☐ Add
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			📮 Add
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		<del></del>	<u> </u>
(attach d	additional sheets, if necessary).	(Be specific)	
<u>provis</u>	mendment provides for an excions for implementing the ame not applicable, indicate N/A)	change, reclassification, or cancellation of endment if not contained in the amendmen	issued shares, at itself:

Th	e date of each amendment(s) adoption: 02/10/2009
Eff	fective date if applicable: 02/10/2009
	(no more than 90 days after amendment file date)
Ad	option of Amendment(s) (CHECK ONE)
☑	The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
	"The number of votes cast for the amendment(s) was/were sufficient for approval
	by"  (voting group)
	(voting group)
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
<b>a</b>	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Dated 02/10/2009  Signature William . Wall
	(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)
	WALTER T. HOLBERT
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)