02000074424

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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DEC 14 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: AA Eleg	pant Furniture & A	ccessories, Inc.
DOCUMENT NU	IMBER: <u>P02000</u>	074424	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
	DOMENIC	H. CAUCCHIA	
	N	lame of Contact Person	
	PROFESSIONAL	ACCOUNTING SERV	nce
	1520 BOTTL	EBRUSH DR. NE	
	PALM BAY,	FL 32905	
	C	ity/ State and Zip Code	
<u></u>	E-mail address: (to be use	d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
		at (
Name	of Contact Person	at () Area Code & Daytime Tele	phone Number
Enclosed is a chec	k for the following amount m	nade payable to the Florida Depart	ment 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

AA ELEGANT FURNITURE + ACCESSORIES, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
 P020000 M4424
(Document Number of Corporation (if known)

wing

A. If amending name, enter the new name	or the corporation.		The
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	he designation "Corp," "Inc	e," or "Co". A professional c	ed" or
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>			;
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF			- C
			_
D. If amending the registered agent and/or new registered agent and/or the new reg		n Florida, enter the name of (<u>the</u>
		n Florida, enter the name of (<u>the</u>
new registered agent and/or the new reg			 t <u>he</u>
Name of New Registered Agent:	gistered office address:		the

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VΡ	Chris James	5585 Schenck Aw #4 Rockledge, FL32955	Add Remove
		V	Add Remove
			Add Remove
	ling or adding additional Articles, entereditional sheets, if necessary). (Be spec		
<u>provisio</u>	nendment provides for an exchange, re ons for implementing the amendment it	classification, or cancellation of iss fnot contained in the amendment i	ued shares, tself:
(if no	ot applicable, indicate N/A)		

The date of each amendment	(s) adoption:
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s ere sufficient for approval.
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement of the following statement of the following 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/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	MN. 15,2010
(Ву	a director, president or other officer – if directors or officers have not been
	cted, by an incorporator is in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	E.J. JAMES (Typed or printed name of person signing)
	\mathcal{D}_{2} —
	(Title of person signing)