## P03000049376

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SECTION OF STATE

SEP 2 9 2014 C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: FLOORIN DOCUMENT NUMBER: PO3000049		MITED INC.					
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
ELWIRA KRUKOWSKI							
FLOORING W	Name of Contact Person	1					
Firm/ Company 1735 N.POWERLINE RD							
POMPANO BEACH,FL 33069							
City/ State and Zip Code  FLOORINGPOMPANO@GMAIL.COM  E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, pleas	e call:						
ELWIRA KRUKOWSKI	<sub>at (</sub> 954	, 642 5555					
Name of Contact Person		de & Daytime Telephone Number					
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:					
\$35 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						

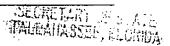
## Articles of Amendment **Articles of Incorporation** of

篇SEP 18 AM 9:50

## FLOORING WORLD LIMITED INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P03000049376



(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s

its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:  ELWIRA KRUKO	
Name of New Registered Agent 1735 N.POWI	
New Registered Office Address: POMPANO B	eet address)
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered)agent. I am familian w	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Che Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each off held. President, Treasurer, Director would be <math>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 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 Chan, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: 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>	Address
1) Change	Р	ELWIRA KRUKOWSKI	18483 OLD PRINCETON L
Add			BOCA RATON
Remove			FL 33498
2) Change			
Add			
Remove			
3) Change	_		
Add			
Remove			
4) Change	<del></del>	<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>]</u>	(Attach additional sheets, if necessary). (Be specific)				
<b>'.</b>	f 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 N/A)				
_					

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	<del></del>
Adoption 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.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
action was not required.  Dated  Dated  09/14/14	
Signature (By a director, president or other officer – if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
MANUKOWSM  (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	