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## COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION:	Office Furniture & Design Concepts, Inc.
DOCUMENT NUMBER:	P03000055335

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Nicholas Gabrielsen	
	Name of Contact Person	
(	OFDC Commercial Interiors, Inc.	
	Firm/ Company	
	11866 Metro Parkway	
	Address	· · · · · · ·
	Fort Myers, FL 33966	
	City/ State and Zip Code	
	ngabrielsen@ofdc-inc.com	<i>_</i>

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicholas Gabrielsen	239	337-1212
Name of Contact Person	Area Code a	& Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ S35 Filing Fee

S43.75 Filing Fee & Certificate of Status S43.75 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

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Office Furniture & D	vesign concepts, inc.		
(Name of Corporation as curre	ntly filed with the Florida Dept. of S	State)	
P03000	055335		
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, th its Articles of Incorporation:	us Florida Profit Corporation adopts	the following amer	idment(s) t
A. If amending name, enter the new name of the corporation:			
OFDC Commercial Inte	riors, Inc.	✓ The	<i>41.714</i> 7
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	l" or the abbrevia	ation
B. Enter new principal office address, if applicable:	11866 Metro Parkway		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Fort Myers, FL 33966		
		14 <b>1</b> 5	,
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	11866 Metro Parkway	SEP -	
	Fort Myers, FL 33966	S P	
			ين 
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	ldress in Florida, enter the name of	the State	
new registered agent and/or the new registered office addre	<u>PSS:</u>		-
Name of New Registered Agent			
<i>(Florida</i>	street addressi		
	, Flor	ida	
<u>New Registered Office Address:</u>			

<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby 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)

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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 Doe X Remove <u>V</u> Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title Name Address (Check One) 1) \_\_\_\_ Change Add \_\_\_ Remove 2) Change \_\_\_\_ Add Remove 3) \_\_\_\_ Change \_\_\_\_ Add \_\_\_ Remove 4) \_\_\_\_ Change \_\_ Add \_ Remove 57 \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 6) \_\_\_\_ Change Add Remove

E,	If amending or addin	ig additional A	rticles,	enter	change(s)	here:
	A second constraint of the					

(Attach additional sheets, (f necessary). (Be specific)

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If an anondment provides for an exchange realized Gention on some Union of the Union	
. 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 N/A)	
(i noi appacarte, maicate NA)	
	<u> </u>

\_\_\_\_\_

	August 15, 2018	
The date of each amendment(s) adoption date this document was signed.	on:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departm	does not meet the applicable statutory filing requirements, this date will nent of State's records.	I not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment(s) nt for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for th	e amendment(s) was/were sufficient for approval	
hy	·	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated	9-18-00	
Signature	- Azanna	
	r. president or other officer - if directors or officers have not been	
	an incorporator dif in the hands of a receiver, trustee, or other court fuciary by that fiduciary)	
	Joseph D. Gammons	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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