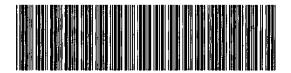
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(Requestor's Name)	
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SECRETARY OF STATE
ALLAHASSEE FLORIDA

M90-511

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	RU-BENOK INTERIORS	, INC.
DOCUMENT NU	JMBER:	P03000067109)
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning th	nis matter to the following:	
		Mylene C. Trujillo	
•	J	Name of Contact Person	
· Ri		-Benok Interiors, Inc.	
		Firm/ Company	
9872 SW 145th Place			
Mian		Address	
		liami, Florida 33186	
		City/ State and Zip Code	
	ОТС	:1717@aol.com	
	E-mail address: (to be us	1717@aol.com ed for future annual report notification)	
For further inform	ation concerning this matter	, please call:	
M	lylene C. Trujillo	at (786)	546-7277
	of Contact Person	Area Code & Daytime Te	elephone Number
Enclosed is a chec	k for the following amount i	made payable to the Florida Depa	rtment 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 A	<u>ddress</u>	Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building	ala.
i alianassee	5, FL 32314	2661 Executive Center Circ	cie

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of	MED
Ru-Benok Interiors, Inc.	
(Name of Corporation as currently filed with the Florida Dept	of Stafe CAE Idea 74 2: 36
P03000067109	MASSEE STATE
(Document Number of Corporation (if known)	- CORIOA

lowing

Ru-Benok	Flooring Interiors, Inc.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	ne designation "Corp," "Inc," or "Co".	or "incorporated" or the A professional corporation
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicabl (Mailing address <u>MAY BE A POST OFF</u>		
D. <u>If amending the registered agent and/or</u> new registered agent and/or the new reg		er the name of the
D. If amending the registered agent and/or new registered agent and/or the new reg Name of New Registered Agent:		er the name of the
new registered agent and/or the new reg		er the name of the
<u>Name of New Registered Agent:</u>	(Florida street address)	er the name of the - , Florida

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>	<u>Address</u>	Type of Action
		<u> </u>	
			☐ Remove
	•		
	nding or adding additional Articles, additional sheets, if necessary). (Be		
·			
	·		
provis	mendment provides for an exchang		
(<i>if</i>)	not applicable, indicate N/A)		
			
			· · · · · · · · · · · · · · · · · · ·

The date of each amendmen	t(s) adoption: September 29th, 2011
Effective date if applicable:	(date of adoption is required) September 29th, 2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_Sep	tember 28th, 2011
sel	y a director, president of the officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiductory by that fiductory)
	Mylene C. Trujillo
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)