P03000077309

's Name)
Zip/Phone #)
WAIT MAIL
Entity Name)
: Number)
Certificates of Status
officer:

Office Use Only



600241954916

11/26/12--01024--014 **52.50

SECRETARY OF STATE

Amend

NOV 28 2012

T. LEWIS

COVER LETTER

Division of Corporations INTERIOR DESIGNER INC NAME OF CORPORATION: P030000 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee □ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

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

(Additional Copy

is enclosed)

Articles of Amendment

to

FILED

2: 33

		of	2012 M	'ny ac
LORI RAPPORT	INTERIOR		- INC SECRE	OV 26 PM 2:
(Name of Corporation a	s currently filed with the		TALLA	HARY OF STAT
P030	0000 77300	7		FLORI
	nt Number of Corporation			_
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is <i>Florida Profit Corpor</i>	ation adopts the followi	ng amendment(s) t
A. If amending name, enter the new n	ame of the corporation:	·		
NA				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design	tain the word "corporate	ion," "company," or " "Co" 4 professional	incorporated" or the corporation name must	abbreviation
word "chartered," "professional associa	ition," or the abbreviation	"P,A."	corporation name musi	comain ine
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	, · · · · ·	_
				_
				_
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		NA		
		+		
				_
				_
D. If amending the registered agent an new registered agent and/or the nev			he name of the	
•		351		
Name of New Registered Agent	P/K			
	(Florida s	treet address)		
Nove Basistana d Office Address	,	·	lorida	
New Registered Office Address:	(City	 ,	(Zip Code)	-
New Registered Agent's Signature, if cl	anging Degistered 4	*•		
hereby accept the appointment as registed			gations 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)

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	MARK D. RAPPORT	664 LONG LAKE DR
X Add			064 LONG LAKE DR
Remove			32765
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	r adding addition nal sheets, if neces	ssary). (Be	specific)	eraj nere.			
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an amendmo	nt provides for a implementing the	n exchange,	reclassificat	ton, or cance	llation of iss	ted shares,	
(if not api	licable, indicate	V/A)	iit ii not com	tamen in the	amenument.	iscii.	
(5 4)	, , , , , , , , , , , , , , , , , , , ,	LÍ /A					
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The date of each amendment(s) adoption: NOVEMBER 20, 2012
Effective date if applicable: NOVEMBER 20, 2012
(no more than 90 days after amendment file date)
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 NOVEMBER 20, 2012
Signature Du Champ
/(By a director, president or other officer - if directors or officers have not been
appointed fiduciary by that fiduciary)
LOPI A. RAPPORT
(Typed or printed name of person signing)
PRESIDENT AND OWNER.
Signature (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) OPI A. PAPT