P03000/10226

(Re	questor's Name)	
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: A A A Foam + Fabric, Inc. DOCUMENT NUMBER: POS 000110226
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Steve Defriese Name of Contact Person AAA Foam & Fabric, Inc. Firm/ Company 607 3rd St. Address Holly Hill FL 32117 City/ State and Zip Code Speedury bookkeeping 24@9mail.com E-mail address: (to be used for-future annual report notification)
For further information concerning this matter, please call:
Steve Defriese at (386) 258-2278 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) (Additional Copy is 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

Articles of Amendment to

Articles of Incorporation of

FILED

AAA Foam 4	Fahric, Inc.
(Name of Corporatio	on as currently filed with the Florida Depited State 2 A 2 ag
<i>Po3.o.</i>	00110226
(Docum	ent Number of Corporation (if known) TALLAHASSEE, LOWING
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:
	The new
	I "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	
I hereby accept the appointment as registered agent. I	I am familiar with and accept the obligations of the position,
Stena	tture 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: \underline{X} Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	VP	-	Michael F. Defriese	6073cg St.
X Add				Holly Hill, FL
Remove				38117
2) Change				
Add				
Remove				
3)Change		_		
Add				
Remove				
4) Change		- -		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	ing or adding additional Art ditional sheets, if necessary).		ucre.	
	N/A			<u></u>
				·
provisio	ndment provides for an excl ns for implementing the ame			
	ot applicable, indicate N/A)	ued share	s are trans	forred
fro	previously issue De	friese t	o Michael	E. Defriese
		,		

The date of each amendment(s) adoption: $09/26/30/8$. if other date this document was signed.	er than the
Effective date if applicable: 09/26/2018 (no more than 90 days after amendment file date)	_
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.	sted as the
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	
 □ 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. 	
Signature OP/26/2018 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)	
Steve Defriese, (Typed or printed name of person signing) Divertor (Title of person signing)	_