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SECRETARY OF STATE
TAYLAHASSEE, FLORIES

- Dave Change 10/14/04

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	HOSPITAL	TY RENOVATION AND) DESIGN
DOCUMENT NUMBER:	P04000045	1183	
The enclosed Articles of Amend			
Please return all correspondence	concerning this m	atter to the following:	
<u></u> J	A COB BR (Name of Co	AMY ontact Person)	. <u>, , , , , , , , , , , , , , , , , , ,</u>
HOSATAL	TY RENOVATI	ON AND DESIGNED	R, INC.
_2024 N.	E. 188th	STXEET dress)	<u> </u>
NORTH MIAN	11 BEACH FL (City/State/	_ 33 18 () and Zip Code)	<u>. E t</u>
For further information concerni	ing this matter, ple	ase call:	
TACOB BRAMY (Name of Contact Person	son)	_at (<u>305</u>) <u>200</u> (Area Code & Daytime	
Enclosed is a check for the follo	wing amount:		
□ \$35 Filing Fee □ \$43.75 F Certifica	iling Fee & te 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 Sect		Street Address Amendment Section	on

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

409 E. Gaines Street

Tallahassee, FL 32399

Articles of Amendment Articles of Incorporation

HOSPIALITY RENOVATION AND DESIGNER, INC.

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

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- ピンケビン(ハル・)	41.1	1 X 🗢

(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) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing): ELITE REMODELING, INC. (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) PLEASE NOTE THAT WE ARE CHANGING THE MAILING FROM: NORTH MIAMI, FL NORTH NIAMI REACH, FL PLEASE MAKE A NOTE OF IT.

(Attach additional pages if necessary)

If an amendment provides for 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: 500+. 28, 2004	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	_
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	r
☐ 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	on
☐ The amendment(s) was/were adopted by the incorporators without shareholder action as shareholder action was not required.	ıd
Signed this 4 day of October 2004.	-
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)	
Abraham Suchar Spiegel (Typed or printed name of person signing)	
Vice President (Title of person signing)	

FILING FEE: \$35