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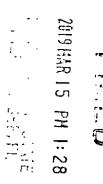
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(Document Number)	03/15/
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Julia Hall Interiors
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Julia H. Johnson
Name of Contact Person  Tulia Hall Interiors
P.O. Box 16384
Funandina Beach, FL 32035
City/ State and Zip Code  Nesign @ Wighallin Hrivis Com  E-mail addfess: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tulia H. Tohuson at (404) 277. 3603  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:
\$35 Filing Fee
Mailing Address Amendment Section  Street Address Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment

to

Articles of Incorporation

FILED

2019 HAR 15 PM 1: 28

(Docur	ment Number o	f Corporation (if known	)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this	Florida Profit Corpora	tion adopts the following	; amendmer
A. If amending name, enter the new name of the co	orporation:			
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "	Co". A professional c	ncorporated" or the ab	The new breviation ontain the
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADI</u>				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>DX</u> )			
D. If amending the registered agent and/or registenew registered agent and/or the new registered			he name of the	
Name of New Registered Agent				
· · · · · · · · · · · · · · · · · · ·	(Florida str	ret address)		
New Registered Office Address:		(City)	, Florida(Zip Co	nde)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent,			gations of the position.	
	ature of New R	egistered Agent if char		

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>	<u>Name</u>	Address
1) Change	<u>Y_</u>	Benjamin McEntyre	P.O. Box 16384 Fernandin Brock, FL 32035
X_ Add		·	Fernandin Buch, FL 32035
Remove			<del></del>
2) Change			
Add			<del></del>
Remove			
3) Change			
Add			- <u>-</u> -
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets,	if nocessary). (Be specifi	/		
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7.5.7.131814				<del></del>
an amendment provid provisions for impleme (if not applicable, in	ting the amendment if no	sification, or cancellation of contained in the amendm	fissued shares, ent itself:	
		N/A		
			,	
			<u>.</u>	<del>_</del>
			<del></del>	
			_	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(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, t document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amenda by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following so must be separately provided for each voting group entitled to vote separately on the amendment(s)	
"The number of votes east 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 share action was not required.	:holder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated 3.11.19	
Signature (By a director, president or other officer – if directors or officers have not	
scleeted, by an incorporator — if in the hands of a receiver, trustee, or other	
appointed fiduciary by that fiduciary)	
Julia H. Johnson	
(Typed or printed name of person signing)	
Yresidut	
(Title of person signing)	