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(Requestor's Name)	
(Address)	900161264859
(Address)	•
(City/State/Zip/Phone #)	10/05/0901026025 **35.
(Business Entity Name)	Amena
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Office Use Only

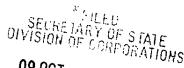
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	AFFOROAGUE	CABINETS,	INC
DOCUMENT NUMBER:	04 000 118	798	
The enclosed Articles of Amendmen	at and fee are submitted for	or filing.	
Please return all correspondence cor	cerning this matter to the	following:	
MA	Name of Contact P	erson er	
AFFOROD	BUE CABIN Firm/ Compan	ETS, INC	
2931	SW 24 Address	<u>≤τ</u>	····
•	U, FC 331 City/ State and Zip		
E-mail addre	ss: (to be used for future annua	al report notification)	
For further information concerning t	his matter, please call:		
MAY OO TOOELP Name of Contact Person	at (<u>30</u>	5) 229-80 a Code & Daytime Telepho	one Number
Enclosed is a check for the following	g amount made payable to	the Florida Departme	ent of State:
\$35 Filing Fee \$43.75 Filing Certificate of	Status Certified	iling Fee & I Copy nal copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division o Clifton Bu 2661 Exec	ent Section of Corporations	

Articles of Amendment to Articles of Incorporation



	of	00	NOTALIUN
A FEDLAN LIF	CABINETS, IN	10. US	OCT -5 AM 10: 50
(Name of Corporation as curre	ntly filed with the Florida Dep		
	00 118 798		
	ber of Corporation (if known)		-
`	•		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this Florida	Profit Corporate	ion adopts the following
A. If amending name, enter the new name of	the corporation:		
			The new
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof	designation "Corp," "Inc," or	"Co". A profes.	sional corporation
B. Enter new principal office address, if appl			
(Principal office address MUST BE A STREE	<u>TADDRESS</u>)		
			-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>		
D. If amending the registered agent and/or r		ida, enter the na	ame of the
new registered agent and/or the new regis			
Name of New Registered Agent:	MAYDA TODEL	<u>A</u>	
		•	
New Registered Office Address:	(Florida street addres	s)	
		, Florid	la.
	(City)	(Zip Code)	a
Non-Boston J.A. 1995 Charles 1995	D t. 4 1 . 4 4 .	·	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent's signature.		cept the obligation	ons of the position.
	me he here	, ,	
Si	ignature of New Registered Ager	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)

<u>Title</u>	<u>Name</u>	Address	Type of Action		
<u>P</u>	THOPUS CHUONA	9255 SW 42400h	_ □ Add □ ☑ Remove		
P	AJ30UT OG YALL	9255 SW 42 TELA HUMU, FL 33165	∠ Z Add □ Remove		
			_		
	ding or adding additional Articles, entered distributional sheets, if necessary). (Be spec				
	dumonal sheets, y necessary). (2e spec	9.47			
F. If an amendment provides for an 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)					
			,		
			And the state of t		
-					
			,		

The date of each amendment(s)	adoption:9	28 0	o 9
Effective,date <u>if applicable</u> :		28/	
(no	o more than 90 day	s after am	endment file date)
	(CHECK	(ANIE)	
Adoption of Amendment(s)	(CHECK	<u>ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the share sufficient for appro	eholders. ´ val.	The number of votes cast for the amendment(s)
			through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes cast	t for the amendmen	t(s) was/w	vere sufficient for approval
by	oting group)		,,,
(vo	oting group)		
The amendment(s) was/were a action was not required.	dopted by the board	d of direct	ors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incor	porators v	without shareholder action and shareholder
Dated 9/	28/09		_
(By a d	lirector, president o	or cirin t	ficer if directors or officers have not been he hands of a receiver, trustee, or other court
_	au.	AQS	TO OECA name of person signing)
	(1 yped o	r printed r	name of person signing)
_		25100	· · · · · · · · · · · · · · · · · · ·
_	(Title of pers	on signing	g)