P05000011906

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COR | PORATION: ALEX FLOC | DRING SERVICES, INC | |
|--------------------------|--|--|---|
| DOCUMENT NU | JMBER: P05000011906 | | ·*···································· |
| The enclosed Arti | cles of Amendment and fee a | are submitted for filing. | |
| Please return all c | orrespondence concerning th | is matter to the following: | |
| | ALEXAND | RE DA SILVEIRA | |
| | (Name | of Contact Person) | |
| | ALEX FLOORIN | NG SERVICES, INC. | |
| | (Fi | rm/ Company) | |
| | 8461 BERNWOO | OD COVE LOOP #309 | |
| | | (Address) | |
| | FORT M | YERS, FL 33966 | |
| | (City/S | tate and Zip Code) | |
| For further inform | ation concerning this matter, | please call: | |
| ALEXAN | DRE DA SILVEIRA | at (239) 789-58 | 50 |
| (Name of Contact Person) | | (Area Code & Daytim | e Telephone Number) |
| Enclosed is a chec | k for the following amount: | | |
| ☑\$35 Filing Fee | \$43.75 Filing Fee & Certificate 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) |
| P.O. Box 6 | nt Section f Corporations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301 | |

Articles of Amendment Articles of Incorporation

ALEX FLOORING SERVICES, INC.

OTHON & PAR. 12.

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

P05000011906 (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 (II changing): |
|--|
| |
| (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) |
| ARTICLE VIII: ADD OFFICER: VICE-PRESIDENT |
| JOAO N. NETO |
| 8461 BERNWOOD COVE LOOP #309 |
| FORT MYERS, FL 33966 |
| |
| CHANGE MAILING ADDRESS: |
| 8461 BERNWOOD COVE LOOP #309 |
| FORT MYERS, FL 33966 |
| |
| (Attach additional pages if necessary) |
| If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N |
| |
| |
| |

(continued)

| The date of each amendment(s) adoption: 10/31/07 |
|---|
| Effective date if applicable: |
| (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. |
| 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 actio 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 (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) |
| ALEXANDRE DA SILVEIRA |
| (Typed or printed name of person signing) |
| PRESIDENT |
| (Title of person signing) |

FILING FEE: \$35