## P05000109112

(Req	uestor's Name)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Unique Sty	le Flooring, Inc.	
DOCUMENT NUME	BER: P0500010911	2	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this mat	ter to the following:	
	Johnny Roman		
		Name of Contact Person	
	Unique Style Floo	oring, Inc.	
•		Firm/ Company	
	961 NW Terrapin	Drive	
•		Address	
	Dunnellon, Florida	a 34431	
,		City/ State and Zip Code	>
unio	questyleflooring@	vahoo.com	
		ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Johnny Roma	an	.352	598-9992
Name of Contact Person			te & Daytime Telephone Number
			,
Enclosed is a check for	the following amount made p	ayable to the Florida Depa	rtment of State:
□ \$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)
	ing Address		Address
	ndment Section sion of Corporations	Amendment Section Division of Corporations	
	Box 6327		Building
Talla	hassee, FL 32314		xecutive Center Circle
		i allana	ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Unique Style Flooring In	C.			_
· · · · · · · · · · · · · · · · · · ·	s currently filed with the F	lorida Dept. of S	tate)	
P05000109112				_
(Documen	nt Number of Corporation (i	if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Co	prporation adopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
n/a				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc." or '	'Co". A professi	or "incorporated" or the a onal corporation name must	bbreviation
B. Enter new principal office address,	if applicable:	n/a		_
(Principal office address MUST BE A S				
				<b>沙</b> 7
			الله الله الله الله الله الله الله الله	J. J.
C. Enter new mailing address, if appl		n/a	ີ້. ທ່າ	F1
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)			FILED 20 PH
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D. If amending the registered agent ar new registered agent and/or the ne			nter the name of the	
	n/a	<b></b>		
Name of New Registered Agent			<del></del>	
	(Clorida at	reet address)		
	n/a	reet aaaress)		
New Registered Office Address:	(City)	· · · · · · · · · · · · · · · · · · ·	, Florida(Zip Code)	<del>-</del>
	(City)	•	(Elp Couc)	
New Registered Agent's Signature, if o	hanging Registered Agen	<u>t:</u>		
I hereby accept the appointment as regis	tered agent. I am familiar	with and accept t	he obligations of the position.	
	·			
Si	gnature of New Registered	Agent, if changing	2	

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 <math>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>	<u>Addres</u> s
1) Change Add Remove	TŘ	Tyler M. Mudrich	1341 NW Terrapin Drive Dunnellon, Florida 34431
2) Change Add Remove		·	
3 ) Change Add Remove			
4) Change Add Remove	<del></del>		
5) Change Add Remove			
6) Change Add Remove			

L. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
n/a	
11 ♥	
	,
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<u> </u>	

The date of each amendment(s) adoption: June 18, 2012
Effective date if applicable: n/a
(no more than 90 days after amendment file date)
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"  (voting group)
(voling group)
☐ 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.
Dated June 18, 2012
Signature John Como
(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 frauciary by that fiduciary)
Johnny Roman
(Typed or printed name of person signing)
President
(Title of person signing)