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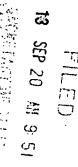
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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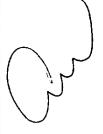
· Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: PAST & FAMILY FLOOR CARE # 1, INC. 105000/6/284 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 398 E. DANIA BEACH BLVD. #218 PANIA, FL 33004 City/ State and Zip Code DWAYLIND & YAHOO, COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DWAYNE YOULD at (954) 572-1040 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address**

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment to Articles of Incorporation

| fast & friendly floore | CANE | #1 | INC. | | | _ | |
|---|---------------|-------------------------------|---------------------|---------------------------------------|--|--------------|--------------|
| (Name of Corporation as currently filed | with the | Florida | Dept. of S | state) | | | |
| PO5000161284 | | • | | | | - | |
| (Document Number of Cor | orporation (| (if know | 1) | | | | |
| Pursuant to the provisions of section 607.1006, Florida Statista Articles of Incorporation: | tatutes, this | s <i>Florida</i> | Profit Co | <i>prporation</i> ad | lopts the following | ng amer | ndment(s) to |
| A. If amending name, enter the new name of the corpo | oration: | | | | | | |
| | | | | | | _The | |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb | "Inc," or | "Co". | | | | | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE | ECC) | | | | ## 31s | _ ~ 0 | |
| (Trincipal Office datasess <u>MOST BE A STREET ADDRE</u> | <u> </u> | | | | 1 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 | - N | |
| | | | | | 1 ma | -بې | _ |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | | · · · · · · · · · · · · · · · · · · · | 34. | 51 | |
| | | | | | | _ | |
| D. If amending the registered agent and/or registered | l office ado | dress in | Florida, e | nter the nan | ne of the | - | |
| new registered agent and/or the new registered offi | | | | | - | | |
| Name of New Registered Agent | | | | | | | |
| | (Florida s | treet addi | ress) | | | | |
| New Registered Office Address: | | | | . Florida | | | |
| | (City | v) | | | (Zip Code) | _ | |
| | | | | | | | |
| New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I as | tered Agen | <mark>it:</mark> r with an | d accent ti | he ohligation | s of the position | | |
| тысьму иссерь те арронитет из гезімегей изет. Ти | am jumnut | mun un | и иссе <i>р</i> і П | ic oungailon | s of the position. | | |
| Signature of New I | Registeren | l Agent i | if changing | σ | | | |

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 | PT John Doe | |
|----------------------------|--------------------------|------------------------------|
| X Remove | V Mike Jones | |
| X Add | SV Sally Smith | |
| Type of Action (Check One) | <u>Title</u> <u>Name</u> | Address |
| 1) Change | P Ronald Mara | 19h 2435 NW 116 Ter |
| Add | | Coral Springs, FL |
| Remove | | 33065 |
| 2) Change | P DWAYNE TO | MLIN 398 E. DANIA BOARU BLUE |
| Add | | DANIA, Cr 33004 |
| Kemove | | DANIA, GZ 33004 |
| 3) Change | | |
| Add | | |
| Remove | | |
| 4) Change | | |
| Add | | |
| Remove | | |
| 5) Change | | |
| Add | | |
| Remove | | |
| 6) Change | | |
| Add | | |
| Remove | | |

| THACH 6 | ıdditional sh | ing additional eets, if necessa | ry). (Be sp | ecific) | _ _ | | |
|--------------------------|-----------------------------------|---------------------------------------|---------------------------|---|---|--|-------------|
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| <u>f an an</u> provis | <u>nendment p</u> ions for imp | rovides for an lementing the | exchange, re amendment | <u>classification</u> if not contain | <u>i, or cancellati</u> ied in the ame | on of issued sh ndment itself: | ares, |
| (if | not applical | ble, indicate N/. | (A) | | | | |
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| date this document was signed. | ption: | , if other than the |
|---|---|---------------------|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | _ |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopt by the shareholders was/were suff | ted by the shareholders. The number of votes cast for the amendment(s) icient for approval. | |
| | oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s): | |
| | r the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were adopt action was not required. | ted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were adopt action was not required. | ted by the incorporators without shareholder action and shareholder | |
| Dated9//7 | 1/13 | |
| Signature # | DITTAL | |
| | ector, president or other officer – if directors or officers have not been | |
| | by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary) | |
| _ | Ronald Maragh (Typed or printed name of person signing) | _ |
| | (Typed or printed name of person signing) | |
| _ | Presiden + . (Title of person signing) | |
| | (Title of person signing) | |