201000013706

(Re	questor's Name)		
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ALLAHASSEE, FLOR

MAY 1.2 2015

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TRIPLE O FLOORING & TILES INC DOCUMENT NUMBER: P07000013706					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
ORLIN OMAR OLIVA					
Name of Contact Person BJ FLOORING & TILES INC					
Firm/ Company 9410 N ELMER STREET					
TAMAPA, FLORIDA 33612					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
ORLIN OMAR OLIVA at (813) 325-0322					
Name of Contact Person Area Code & Daytime Telephone Nu	mber				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301					

Articles of Amendment

Articles of Incorporation

of

TRIPLE O FLOORING & TILES INC

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

P07000013706

(Document Number of Corporation (if known)

BJ FLOORING & TILES INC une must be distinguishable and contain the word "c	The new
Corp.," "Inc.," or Co.," or the designation "Corp.," "Lord "chartered," "professional association," or the abbi	Inc," or "Co". A professional corporation name must contain the
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRES</u>	N/A
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent N/A	
Name of New Registered Agent N/A	(Florida street address)
Name of New Registered Agent N/A	(Florida street address), Florida (City) (Zip Code)
Name of New Registered Agent New Registered Office Address:	, Florida (City) (Zip Code)

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, Sully Smith is named the V and S. These st., uld 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) Name Addre	<u>es</u> s
1) Change	
Add	
Remove	
2) Change	·
Add	
Remove	
3) Change	
Add	
Remove	
4) Change	
Add	
Remove	
5) Change	
Add	
Remove	
6) Change	
Add	
Remove	

E. <u>If an</u>	nending or adding a ch <i>additional sheets</i> ,	if nagagama)	les, enter chan	ge(s) here:			
	ch additional sneets,	y necessary).	(ве кресіліс)				
V/A							
				·			
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		 -					
	-						
F. <u>If a</u>	<u>n amendment provi</u>	des for an exch	ange, reclassif	ication, or can	cellation of is	ssued shares,	
pr	ovisions for implem (if not applicable, i	enting the amer	<u>ndment if not c</u>	contained in th	e amendmen	t itself:	
K1/A	(i) not applicable, i	maicaic 11/11)					
N/A		<u>.</u>					
					·		
•							
							
							<u></u>

The date of each amendment(s) a	doption: <u>02/1//2015</u>	, if other than th
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_02/17/2	015	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court	_ _
appoi	nted fiduciary by that fiduciary)	
	ORLIN OMAR OLIVA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	