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## COR AMND/RESTATE/CORRECT OR O/D RESIGN **NEW FOAM DESIGN INC**

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## Articles of Amendment to Articles of Incorporation of

## **NEW FOAM DESIGN INC**

## (Name of Corporation as currently filed with the Florida Dept. of State) P07000036755

(Document Number of Corporation (if known)

| ts Articles of Incorporation:   |                                       |                           |                                      |                          |
|---|---------------------------------------|---------------------------|--------------------------------------|--------------------------|
| A. If amending name, enter the new pame of  | he corporation:                       |                           |                                      |                          |
|   |                                       |                           |                                      | The new                  |
| name must be distinguishable and contain the<br>"Corp.," "Inc.," or Co.," or the designation "<br>word "chartered," "professional association," o | Corp," "Inc," or "Co".                | A professional corpora    | rated" or the ab<br>tion name must c | breviation<br>ontain the |
| t. Enter new principal office address, if appli<br>Principal office address <u>MUST BE A STREET</u>   | <u>cable:</u><br>: <u>ADDRESS</u> )   |                           |                                      |                          |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC  | <u> </u>                              |                           |                                      |                          |
| . If amending the registered agent and/or renew registered agent and/or the new regist  |                                       | ı Florids, enter the nam  | e of the                             |                          |
| Name of New Registered Agent  | · · · · · · · · · · · · · · · · · · · |                           |                                      |                          |
|   | (Florida street add                   | dress)                    |                                      | TALL                     |
| New Registered Office Address:  |                                       | , Florida_                |                                      | A.A.                     |
|   | (City)                                |                           | (Zip Code)                           | ASSE                     |
| ew Rogistered Agent's Signature, if changing  | Registered Agent:                     |                           |                                      | Ç™ <u>c</u><br>====      |
| hereby accept the appointment as registered ag  |                                       | nd accept the obligations | of the position.                     | LORIC                    |
| Signature   | of New Registered Agent.              | if changing               |                                      | )A                       |

Page 1 of 4

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             | PI        | John Doe      | ·                    |
|-------------------------------|-----------|---------------|----------------------|
| X Remove                      | <u>v</u>  | Mike Jones    |                      |
| X Add                         | <u>sv</u> | Sally Smith   |                      |
| Type of Action<br>(Check One) | Title     | <u>Name</u>   | Address              |
| I) Change                     | \$        | Felipe Mendes | 2301 NW 33RD COURT   |
| Add                           |           |               | 109                  |
| Remove                        |           |               | POMPANO BEACH, FL 33 |
| 2) Change                     |           | _             | 33069                |
| Add                           |           |               | -                    |
| Remove                        |           |               |                      |
| 3) Change                     |           |               |                      |
| Add                           |           |               |                      |
| Remove                        |           |               | •                    |
| 4) Change                     |           | _             | <u> </u>             |
| Add                           |           |               |                      |
| Remove                        |           |               |                      |
| 5) Change                     |           |               |                      |
| Add Remove                    |           |               |                      |
| 6) Change                     |           |               | ,                    |
| Add                           |           |               |                      |
| Remove                        |           |               |                      |

|   | if necessary). (Be s | nter change(s) here<br>specific)              |  |                     |
|---|----------------------|---|--|---------------------|
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| n amendment provide<br>ovisions for implemen<br>(if not applicable, ind | ting the amendmen    | reclassification, or<br>t if not contained i  | cancellation of issue<br>the amendment its   | ed spares,<br>relf: |
| <u>ovisions for implemen</u>  | ting the amendmen    | reclassification, or<br>it if not contained i | cancellation of issue<br>the amendment its   | d shares,<br>elf:   |
| <u>ovisions for implemen</u>  | ting the amendmen    | reclassification, or<br>t if not contained i  | cancellation of issue<br>a the amendment its | d shares,<br>elf:   |
| <u>ovisions for implemen</u>  | ting the amendmen    | reclassification, or<br>it if not contained i | cancellation of issue<br>the amendment it    | d shares.<br>elf:   |
| <u>ovisions for implemen</u>  | ting the amendmen    | reclassification, or<br>t if not contained i  | cancellation of issue<br>n_the amendment its | d shares.<br>elf:   |
| <u>ovisions for implemen</u>  | ting the amendmen    | reclassification, or<br>t if not contained i  | cancellation of issue<br>a the amendment it  | d shares.           |
| <u>ovisions for implemen</u>  | ting the amendmen    | reclassification, or<br>t if not contained i  | cancellation of issue<br>a the amendment its | d shares,<br>elf:   |
| n amendment provide<br>ovisions for implemen<br>(if not applicable, ind | ting the amendmen    | reclassification, or<br>t if not contained i  | cancellation of issue<br>n the amendment its | d shares.           |

| The date of each amendment date this document was signed |  | , if other than the |
|--|--|---------------------|
| Effective date if applicable:                            | 03/09/2015   |                     |
| MINOR COLOR IN HIPPINGIO.                                | (no more than 90 days after amendment file date)   | <del></del>         |
| Adoption of Amendment(s)                                 | (CHECK ONE)  |                     |
| The amendment(s) was/wer<br>by the shareholders was/we   | re adopted by the shareholders. The number of votes cast for the amendment(s) ore sufficient for approval.   |                     |
| The amendment(s) was/wer must be separately provide      | te approved by the shareholders through voting groups. The following statement ad 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)   |                     |
|  | (voing group)  |                     |
| The amendment(s) was/wer action was not required.        | e adopted by the board of directors without shareholder action and shareholder   |                     |
| The amendment(s) was/wer action was not required.        | e adopted by the incorporators without shareholder action and shareholder  |                     |
| Dated_03/0   | 9/2015   |                     |
| Signature 4  | Total Color  |                     |
| (B)  | y a director, president or other officer - if directors or officers have not been  |                     |
|  | lected, by an incorporator — if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)                                 |                     |
|  | FELIPE MENDES  |                     |
|  | (Typed or printed name of person signing)  | •                   |
|  | SECRETARY / DIRECTOR   |                     |
|  | (Title of person signing)  | _                   |