## P07000096032

(Re	questor's Name)	
(Ad	dress) =	
·	·	
( h.a)	dress)	
įnu	uiess)	
(Cit	y/State/Zip/Phone	<i>f</i> )
C Broke UB	CT SALATE.	<b>—1</b> ,
PICK-UP	WAIT	MAIL
(Bu	sin <b>ess</b> Entity Nam	ne)
(Do	cument Number)	
(50	our russion,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filina Officer: '-	
	· ······ <b>g</b> · · · · · · · ·	
	····	

Office Use Only



800108874718

09/06/07--01011--010 \*\*35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

AND

C. Couriette SEP 1 3 2007

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	on: Schramek	+ Sons Upholste	ry, Inc.
DOCUMENT NUMBER:	P070000	96032	
The enclosed Articles of Ar	nendment and fee are su	abmitted for filing.	
Please return all correspond	lence concerning this ma	atter to the following:	
	41an Schr (Name of Co	awek Intact Person)	
Schro	rmek + Sons	Oppolstery, I	nc_
6880	46th Ave	N (Iress)	
St.1	Detershung, (City/State a	FL 33709 nd Zip Code)	<del></del>
For further information con-	cerning this matter, plea	se call:	
Alan Schr (Name of Contac	amek zt Person)	at (72-7) 545-1 (Area Code & Daytime Tele	549 ephone Number)
Enclosed is a check for the	following amount:		
	3.75 Filing Fee & rtificate 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)
Mailing Address Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	tions	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Schramek + Sons Upholstery, Inc. (Name of corporation as currently filed with the Florida Dept. of State)		
(Name of corporation as currently filed with the Florida Dept. of State)		
P0700096032		
(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 (if changing):		
RICE TO A CONTROL OF THE PROPERTY OF THE PROPE		
(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 III to add new officer:		
Title = VP		
Carrie Schramek		
5420 2nd Ave N		
St. Aetersburg, Fl 33710		
(Attach additional pages if necessary)		
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		

(continued)

The date of each amendment(s) adoption: $\frac{9/2107}{}$
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 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.
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)  Alan Schvamek  (Typed or printed name of person signing)
(Title of person signing)

4 5 6 4

FILING FEE: \$35