P67000102581

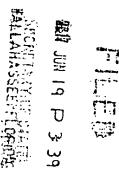
(R	equestor's Name)
(A	ddress)
(A·	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(8)	usiness Entity Name)
(D)	ocument Number)
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COVER LETTER

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TO: Amendment Se Division of Cor			€		
NAME OF CORPO	ORATION: 1/2 Price Mattress	IX Inc			
	P07000102581				
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	Benjamin Tabraue				
		Name of Contact Perso	n		
	1/2 Price Mattress IX Inc				
	Firm/ Company				
	13900 NW 7 Ave S.E Corne	r Unit			
		Address			
	Miami, Fl 33168				
		City/ State and Zip Cod	e		
ben	jitabraue@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
benjamin Tabraue		954 at (200-4208		
Name	e of Contact Person		de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)		
Mailing Address			<u>Address</u>		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

1/2 Price Mattress IX Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P07000102581 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "PA" B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent - I am familiar with and accept the obligations of 🎁 Signature of New Registered Agent, if changing

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: \underline{X} Change	<u>РТ</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Т	Calch Tabraue	13900 NW 7 Ave S.E Corner Unit
X Add			Miami, FL 33168
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			·
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6)Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N A)	ndment if not contained in the amendment itself:
	1

The date of each amendment(s) adoption:	if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	t be listed as the
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 east 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.	
06/01/2017 Dated	
Signature	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed (iduciary by that (iduciary))	
Benjamin Tabraue	
(Typed or printed name of person signing)	
President	
(Title of person signing)	