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## **COVER LETTER**

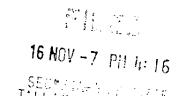
**TO:** Amendment Section

**Division of Corporations** BOSS INTERIORS OF MIAMI, INC. NAME OF CORPORATION: P07000112342 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CHRISTOPHER THOMPSON Name of Contact Person BOSS INTERIORS OF MIAMI, INC. Firm/ Company 1233 SE 11TH AVENUE Address **DEERFIELD BEACH FL 33441** City/ State and Zip Code BOSSINTERIORS@BELLSOUTH.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CHRISTOPHER THOMPSON Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: **43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee **\$35** Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of



BOSS INTERIORS OF MIAMI, INC.

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P07000112342	
(Docum	ment Number of Corporation (if known)
tursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the co	prporation:
	The new cd "corporation," "company," or "incorporated" or the abbreviation or "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	zistered Agent: I am familiar with and accept the obligations of the position.
62	nature 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: X.Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	MAO, WEIHUA	10017 WINDING LAKE RD
Add			UNIT 102
X Remove			SUNRISE, FL 33351
2) X Change	P	THOMPSON, CHRISTOPHER D	1233 SE 11TH AVENUE
Add			DEERFIELD BEACH, FL 33441
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
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O Channe			
6) Change	<del></del>		
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Remove			

	(Be specific)
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an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the amo	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) a	doption:, if othe	r than the
date this document was signed.	GUST 15, 2016	
Effective date if applicable:	0051 15, 2010	
	(no more than 90 days after amendment file date)	-
Note: If the date inserted in this I document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be list epartment of State's records.	ted as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
11/02/201 Dated	6	
Signature	In My	
selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	CHRISTOPHER THOMPSON	
	(Typed or printed name of person signing)	-
	PRESIDENT	
	(Title of person signing)	-

AUGUST 15, 2016