P07000129986

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 1 0 2014 C. CARIROTHIERS

COVER LETTER.

Division of Corporations NAME OF CORPORATION: Rupe's Creative Interiors, Inc. DOCUMENT NUMBER: P07000129986 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Richard J. Rupe Name of Contact Person Rupe's Creative Interiors, Inc. Firm/ Company 2620 Vermont Strreet Address Melbourne, FL 32904 City/ State and Zip Code richrupe@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard J. Rupe Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Rupe's Creative Interiors, Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P07000129986	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amerits Articles of Incorporation:	ndment(s) to
A. If amending name, enter the new name of the corporation:	
The	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	
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: , Florida (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Ruth Ann Rupe	2620 Vermont Street
Add			Melbourne, FL 32904
Remove			
2) Change		_	
Add			
Remove		·	
3) Change			
Add			
Remove			
4) Change			
Add			SSE -5
Remove			
5) Change			ORIDA
Add			
Remove			
6) Change			
Add			
Remove			

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lf an	amondment or	ovides for an ex	ohanga raala	ssification and	anasllation of	issued shames	
prov	visions for imple	ementing the an	iendment if n	ot contained in	the amendmen	nt itself:	
1	(if not applicabl	e, indicate N/A)					

The date of each amendment(s) date this document was signed.	adoption:	_, if other than the
Effective date if applicable:	anuary 1, 2014	
	(no more than 90 days after amendment file date)	-
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
_{Dated} Febru	ary 2, 2014	
Signature	Muhax T. Muhl	
(By selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	_
	Richard J. Rupe	
	(Typed or printed name of person signing)	-
	President	
	(Title of person signing)	-
	SECRETARY OF A	14 FEB -5 P