

PO8000020970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/21/08--01035--018 **35.00

Amend

FILED
08 AUG - 1 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*AMEND
CEG
8/14*



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2008

SHAMEER MOHAMED
BLOSSOM CARPET, INC.
215 MARION OAKS MANOR
OCALA, FL 34473

SUBJECT: BLOSSOM CARPET, INC
Ref. Number: P08000020970

We have received your document for BLOSSOM CARPET, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 808A00043433



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 24, 2008

SHAMEER MOHAMED
215 MARION OAKS MANOR
OCALA, FL 34473

SUBJECT: BLOSSOM CARPET, INC
Ref. Number: P08000020970

We have received your document for BLOSSOM CARPET, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

New registered agent must sign as registered agent accepting appointment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 808A00042974

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Blossom Carpet, Inc.

DOCUMENT NUMBER: P08000020970

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shameer Mohamed

(Name of Contact Person)

Blossom Carpet, Inc.

(Firm/ Company)

215 Marion Oaks Manor

(Address)

Ocala, FL 34473

(City/ State and Zip Code)

For further information concerning this matter, please call:

Shameer Mohamed

(Name of Contact Person)

at (352) 347-2127

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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

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**

Blossom Carpet, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P08000020970

(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):

(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 II prin. address change to: 215 Marion Oaks Manor, Ocala, FL 34473

Article III mailing add. change to: 215 Marion Oaks Manor, Ocala, FL 34473

Article V register agent change to : Shameer Mohamed 215 Marion Oaks Manor, Ocala, FL 34473

Article VII change Officers to Title: P Shameer Mohamad 215 Marion Oaks Manor, Ocala, FL 34473

VP Mohanie Sewnarine 215 Marion Oaks Manor, Ocala, FL 34473

I SHAMEER MOHAMED AM FAMILIAR WITH
AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS
REGISTERED AGENT FOR SAID CORPORATION

Shameer Mohamed

(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)

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08 AUG - 1 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 07/25/2008

Effective date if applicable: 07/25/2008
(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

Faneza Sewnarine

(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)

Faneza Sewnarine

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35