# P0900000694

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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Baths and Floors, Inc				
DOCUMENT NUMBER: P0900000694				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Ryan McCulloush  Name of Contact Person				
Name of Contact Person				
Baths and Floors Inc				
Firm/ Company				
3015 NW 92 AUR Address				
Address				
Coral Springs, FL 33065  City/State and Zip Code				
ryann_33065@yahoo.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Ryan McCullough at (954) 857-4257  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:				
\$35 Filing Fee \$\ \text{Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy} \ (Additional copy is enclosed) \$\ \text{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**

### Articles of Incorporation of

Baths and Floors, Inc.  (Name of Corporation as currently filed with the Florida Dept. of State)  P0900000 694  (Document Number of Corporation (if known)				
(Name of Corporation as currently filed with the Florida Dept. of State)				
P0900000 694				
(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 amendment(s) to its Articles of Incorporation:				
A. If amending name, enter the new name of the corporation:				
The new				
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 "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:				
New Registered Office Address: (Florida street address)				
Florida				
, 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.				
The cost accept the appointment as registered agent. I am juitated 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP_	Shawn Lockman	1638 Poinsettia Dr Ft. Lauderdale, FL33	Add
		(954-873-9922)	S Remove
			_ □ Add □ Remove
			-
<del></del>	<del> </del>		_ □ Add _ □ Remove
			-
	ending or adding additional Articles, ente		
(allach	additional sheets, if necessary). (Be spec		
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	amendment provides for an exchange, re isions for implementing the amendment if		
	f not applicable, indicate N/A)		<del></del>
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· <u></u>			-

The date of each amendment(s) adoption: (9 A) 5 39
(date of adoption is required)
Effective date if applicable: 19 Aug 09 (no more than 90 days after amendment file date)
(no more man so days after amenament file date)
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 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.
Dated 19 AUG 09 Signature Ryon McColland
Signature Ryan McColland  (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)
(Typed or printed name of person signing)
(Title of person signing)