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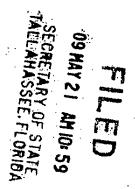
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C.COULLIETTE

MAY 272009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Master Carpet Servi	00, 110.		
P09000031875			
e submitted for filing.			
matter to the following:			
Kris Kelley			
ime of Contact Person			
r Carpet Service, Inc.			
Firm/ Company			
Pine Hollow Drive			
Address	, , , , , , , , , , , , , , , , , , , 		
amna El 33694			
ty/ State and Zip Code			
ustor@vahao aam			
for future annual report notificat	tion)		
olease call:			
at (813)	965-6111		
Area Code & Daytii	me Telephone Number		
ade payable to the Florida I	Department of State:		
\$43.75 Filing Fee & Certified Copy (Additional copy is enclo	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Street Address			
Amendment Section			
-	ns		
	PO9000031 e submitted for filing. matter to the following: Kris Kelley me of Contact Person Carpet Service, Inc. Firm/ Company Pine Hollow Drive Address ampa, FL 33624 by/ State and Zip Code ester@yahoo.com for future annual report notificate colease call:		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Master Carp	pet Service, Inc.	
(Name of Corporation as current	tly filed with the Flori	ida Dept. of State)
P0900	00031875	
(Document Number	er of Corporation (if kn	nown)
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this I	Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the	he corporation:	
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the doname must contain the word "chartered," "profes	esignation "Corp," "In	nc," or "Co". A professional corporation
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)		
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered Mame of New Registered Agent: 	ristered office address	S in Florida, enter the name of the
_		
New Registered Office Address:	(Florida street	t address)
_	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		

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>	Name	Address	Type of Action
Secret	Timothy Clewis	2918 W Dewey Street Tampa. FL 33607	
			
	ing or adding additional Articles ditional sheets, if necessary). (B		
provisio		ge, reclassification, or cancellation of nent if not contained in the amendme	

The date of each amendment(s) adoption: May 18, 2009
Effective date if applicable:
(no more than 90 days after amendment 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(by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statem 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)
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated May 18, 2009
Signature 7250 DRelly
(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)
Kris Kelley
(Typed or printed name of person signing)
President President
(Title of person signing)