P09000044595

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Amend 1011/23/09

COVER LETTER

TO: Amendment Section

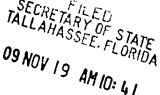
Division of Corporations				
NAME OF CORPORATION: SEASIDE FLOORS INC.				
DOCUMENT NUMBER: P09000044595				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Contact Person				
SEASIDE FLOORS NC.				
2731 OCEAN CLUB BUD. #301				
HOUGHOOD FL. 33019 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at (954) 326-1471 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee \$\bigcup \$43.75 Filing Fee & Certificate of Status \$\bigcup \$43.75 Filing Fee & Certificate of \$\bigcup \$43.75 Filing Fee & Certificate of \$\bigcup \$43.75 Filing Fee & Certificate of \$\bigcup \$43				
Mailing Address Street Address				
Amendment Section Amendment Section Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation



	of		09 NOV 1
SEASIDE FLOORS	NC.		09 NOV 19 AM 10: 4
(Name of Corporation as curren	ntly filed with the Florid	a Dept. of State)	•
POGC	per of Corporation (if kno		-
`		,	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this <i>Fi</i>	lorida Profit Corporat	ion adopts the following
A. If amending name, enter the new name of	the corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the aname must contain the word "chartered," "professions"	designation "Corp," "Inc	c," or "Co". A profes.	sional corporation
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or renew registered agent and/or the new registered		n Florida, enter the na	nme of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street a	address)	
_		, Florid	a
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agential.		and accept the obligation	ns 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 fitle, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	<u>Address</u>	Type of Action
<u>V. P.</u>	WAYNE H. KUKAR	2731 OCEAN CUB BLVD. #301 HOLYWOOP, FL. 3301	_ 12 Add □ Remove
			_ □ Add □ □ Remove
	ding or adding additional Articles, enter dditional sheets, if necessary). (Be speci		
	,		
<u>provisi</u>	mendment provides for an exchange, recons for implementing the amendment if not applicable, indicate N/A)		
Four		NT OF SEASIC	
TO I	AS WELL AS FORER	TY OF WAYN	E H. KUKAR
			

	Der. NOV. 17
The date of each amendment(s) add	ption: 1009
Effective date if applicable:	NOV - 17 date of adoption is required)
	ore than 90 days after amendment file date)
A. I. d. a. d. A. a. A. a. (4)	(CHECK ONE)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval
by	g group)
(votin	g group)
The amendment(s) was/were adopted action was not required.	oted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adoptaction was not required.	oted by the incorporators without shareholder action and shareholder
Dated	E, 16, 2009
Signature	Julia P. Winter
selected, b	yor, president or other officer – if directors or officers have not been y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
<u></u>	OUA R. WHITE
	(Typed or printed name of person signing)
	PRESIDENT (Title of person signing)
	(THICOT PERSON SIGNING)