## P09000048398

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TENESSE FLORING

Mary May

## **COVER LETTER**

**TO:** Amendment Section **Division of Corporations** SHEE B. INC. NAME OF CORPORATION: **DOCUMENT NUMBER:** \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: RASHEEDAH BLACKWOOD. at (954) 865-5935

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 **□ \$43.75** Filing Fee & **■\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## **Articles of Amendment** to **Articles of Incorporation** of

SHEE B. INC.	
(Name of Corporation as currently filed with the Flor	ida Dept. of State)
D190004839	<del>7</del>
(Document Number of Corporation (if ki	iown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this amendment(s) to its Articles of Incorporation:	Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
FROCKS + FLATS INC.	The new
name must be distinguishable and contain the word "corporation, abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "I name must contain the word "chartered," "professional association," of	nc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	580 CORONA STREET OF
<u></u>	2AMAR, FL 33025 22 22 22 22 22 22 22 22 22 22 22 22 2
	O CORONA STREET 5 3
MIR.	MAR, FC 33025
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
W CW P III II	
Name of New Registered Agent:	
	_
New Registered Office Address: (Florida stree	(address)
11/1	
	, Florida
(City)	(Zip Cods)
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)

<u>Title</u>	Name	Address	Type of Action
			□ Add □ Remove
	·		
E. If amen (attach a	ding or adding additional A dditional sheets, if necessary)	rticles, enter change(s) here: . (Be specific)	<del> </del>
		N/A	
	.,		
<u>provisi</u>	mendment provides for an eons for implementing the an eons to applicable, indicate N/A)	xchange, reclassification, or cancellation and the amend the amend	of issued shares, ment itself:
<del> </del>			
· · · · · · · · · · · · · · · · · · ·			
		NA	

The date of each amendment		- ASSESSED VICES	JAN 4, 20/0
Effective date <u>if applicable</u> :		(date of adoption is requ 2010 days after amendment fil	
Adoption of Amendment(s)	(СНЕ	CK ONE)	
The amendment(s) was/we by the shareholders was/we			r of votes cast for the amendment(s
• •			ing groups. The following stateme arately on the amendment(s):
"The number of votes	cast for the amendm	nent(s) was/were sufficie	nt for approval
by	(voting group)		,
action was not required.			shareholder action and shareholder
Signature (By sele	a director, presiden cted, by an incorpor ointed fiduciary by	nactuod nt or other officer – if dire rator – if in the hands of	ectors or officers have not been a receiver, trustee, or other court
	RASH (Typed	IEEDAH BLAC d or printed name of pers	KW/D OD on signing)
		72, PRESIDENT	
	(Title of page 1)	erson signing)	