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SEP 22 2017 S. YOUNG 17 SEP 21 MEII: 40 SECRETARY OF STATE ALLAHASSEE, FLORDA

COVER LETTER

TO: Amendment Section Division of Corporations GEROY FLOORING VINYL CERAMIC 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: Firm/ Company E329 GALEWOOD CIRC.

Address

Tamk, FC. 3.36/5

City/ State and Zip Code Gerouf Coring annual report notification)

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: FRANCISCO (FEVOY at (1813) 451-6690

Name of Contact Person Area Code & Davtime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (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

FERNI FLOR	OKING VINYL CERAMIC INC.
	OKING VINYL CERAINIC INC. Is currently filed with the Florida Dept. of State)
Dan	
(Daguerani	9000102853 Number of Corporation (if known)
(Доситент	Number of Corporation (it known)
Pursuant to the provisions of section 607,1006, Florida Statista Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	ration:
	The new
name must be distinguishable and contain the word "c" "Corp.," "Inc.," or Co.," or the designation "Corp.," "word "chartered," "professional association," or the abbi	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRE.</u>	<u>SS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED SEP 21 MILLS
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Signature	e 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	<u>Doe</u>			
X Remove	<u>V</u> <u>Mike Jones</u>				
X Add	<u>SV</u> <u>Sally</u>	Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	<u> VP</u>	CARlos A PALIZA	6003 16th AVE 5.		
Add			Tampy FC 336A		
Remove					
2) Change	V. P	PESRO BURGOS	2917 W Wilder Ave. TAMPG, FC 33614		
Add Remove			TAMPG, FC 336/4		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
		_
		
		•
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the amer	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) ado	Intion:	9/15/17	, if other than the
date this document was signed.	pasa		, it other than the
C		9/15/17	
Effective date <u>if applicable</u> :	/no more than	90 days åfter amendment file d	atel
	IND MOVE INQU	To days after amenament file a	uie)
Note: If the date inserted in this blo document's effective date on the Depa		licable statutory filing requirem	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The icient for approval.	he number of votes cast for the	amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea			
"The number of votes east fo	or the amendment(s) was/w	ere sufficient for approval	
by			
	(voting group)		
☐ The amendment(s) was/were adopt action was not required.	ted by the board of director	rs without shareholder action an	d shareholder
☐ The amendment(s) was/were adopt action was not required.	led by the incorporators wi	thout shareholder action and sha	archolder
Dated	1,5/17 CDT		
Signature	CDI		
(By a dire	ector, president or other off	ficer – if directors or officers ha	
	by an incorporator – if in t d fiduciary by that fiduciary	the hands of a receiver, trustee, o	or other court
• •	_		
France	uro Gen	d name of person signing)	
·	(1 yped or printed	name of person signing)	
_		<u> </u>	
	(Title	e of person signing)	