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(Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
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SECRETARY OF STATE

a R. Alex

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Floridg Floors Southwest, Inc
DOCUMENT NUMBER: P100000 2308
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christian Rich Name of Contact Person Florida Flores Sw 46
Firm/ Company 1550 AQUA Cir
Port Charlotte FL 33981 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christing Rich at (978) 375 - 7503 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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) \$35.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation
Florida Flores South vestor les
(Name of Corporation as currently filed with the Florida Dept. of Stant) 7: 43
PIDDOODA308 SECRETARY OF 87
(Document Number of Corporation (if known) AHASSES TATE
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:
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)
15561 AQUA CIF
Yort Charlotte, FL 33981
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
15501 ARDACIT
Port Charlotte, FL 33981
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 Chastina Rub
15561 AQUA CIT Port Charlotte FL 33 (Florida street address)
New Registered Office Address: +Ort (Wildte , Florida 33981 (City) (City)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

Check if applicable
The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 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 Doe X Remove <u>y</u> Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action <u>Title</u> Name Address (Check One) oomas A Rich 1) ____ Change _ Add X Remove 10mas A Rich 2) ____ Change ____ Add Add hristing M Rich _ Change <u></u> ∧dd Remove avid & Kich Trea __ Change Wyman Billerica MA ONDI 01801 Remove risting m Rich 6) ____ Change __X_ Add

amending or adding additional Art ttach additional sheets, if necessary).	(Be specif	îc)	 -			
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an amendment provides for an exch	iange, reclas	sification, o	r cancellatio	n of issued sh	iares,	
rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if no	ot contained	in the amer	ndment itself:	·	
(ij not applicable, indicate N/A)						
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NA				 .		
						
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	7					

The date of each amendment(s) adopti	on:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days	after amendment file date)
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable s nent of State's records.	natutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The numbers for approval.	er of votes cast for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through v voting group entitled to vote se	oting groups. The following statement parately on the amendment(s):
"The number of votes cast for the	ne amendment(s) was/were suff.	cient for approval
by		"
	(voting group)	
Dated Teb Signature (By a directo	25 2031 1. president or other officer – if	directors or officers have not been
selected, by	an incorporator – if in the hand: luciary by that fiduciary)	of a receiver, trustee, or other court
	(Typed or printed name o	m Rich

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000002308

Entity Name: FLORIDA FLOORS SOUTHWEST, INC.

Current Principal Place of Business:

8256 ANTWERP CIR

PORT CHARLOTTE, FL 33981

Current Mailing Address:

8256 ANTWRP CIR

PORT CHARLOTTE, FL 33981 US

FEI Number: 27-1656148 Name and Address of Current Registered Agent:

RICH, THOMAS A 8256 ANTWERP CIRCLE

PORT CHARLOTTE, FL 33981 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Jan 21, 2021

Secretary of State

9557049858CC

Officer/Director Detail:

Title

PRES

Title

TREA

Name

RICH, THOMAS A

Name

RICH, THOMAS A

Address

8256 ANTWERP CIRCLE

Address

8256 ANTWERP CIRCLE

City-State-Zip: PORT CHARLOTTE FL 33981

City-State-Zip: PORT CHARLOTTE FL 33981

Certificate of Status Desired: No

Title

SEC

Name

RICH, THOMAS A

Address

8256 ANTWERP CIRCLE

City-State-Zip: PORT CHARLOTTE FL 33981

I horeby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal affect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears abova, or on an attachment with all other like empowered.

SIGNATURE: THOMAS A RICH

PRESIDENT

01/21/2021

Electronic Signature of Signing Officer/Director Detail

Date

1. C. b.