P100000008204

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	-
(Cit	y/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
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2012 OCT 15 AM 11: 30
SECREWARY OF STATE
ASSERT, FLORIDA

10/11/12

COVER LETTER

TO: Amendment Section

Division of Corporations	s ·	
NAME OF CORPORATIO	n: DI AND P International Upholstery, P1000000 8204	Inc,
DOCUMENT NUMBER: _	P1000000 8204	
The enclosed Articles of Ame	endment and fee are submitted for filing.	
Please return all corresponder	nce concerning this matter to the following:	
	Sirusla Samla Samla Name of Contact Person DI and P International Upholstery Inc Firm/Company	
-	1864 NW 54th Ave Address Margate FL 33063 City/ State and Zip Code	
E For further information conce	RamSawak & hol Com -mail address: (to be used for future annual report notification)	
Bal Ramsaus Name of Cont	at (954) 647 - 0117 Area Code & Daytime Telephone Number	
Enclosed is a check for the fo	ollowing amount made payable to the Florida Department of State:	
	Status Certificate of Status Certificate of Status (Additional copy is enclosed) Status Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Ao Amendmen Division of P.O. Box 6	at Section Amendment Section Corporations Division of Corporations Clifton Building	

Articles of Amendment to

	articles of Incorporation of	FILED
D I and P Interna (Name of Corporation as currently file	itional Upholstery	(nc 1012 OCT 15 AM 11: 30
		D OF STATE
P1000000	8204	SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Document Number of C	Corporation (if known)	IALLAIN
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpo	pration adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:	The ways
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the a	" "Inc," or "Co". A professiona	
B. Enter new principal office address, if applicable:	1864	NW SUAVE
(Principal office address MUST BE A STREET ADD)	RESS) Marzat	NW 54 Ave e FL 33063
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>		NW 54 AUE te FL 33063
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent		r the name of the
New Registered Office Address:	(Florida street address) (City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.	istered Agent:	bligations of the position.
Signature of New	w 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address .
1) Change		NA	NIA
Add			
Remove			A
2) Change		NIA	NIA
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			The state of the s
6) Change			-
Add			
Remove			

	(Be specific)) here:	
		1.11	
	***************************************	NIA	
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n amendment provides for an exchiousions for implementing the amen	inge, reclassification description of the contract of the cont	on, or cancellation of	issued shares,
(if not applicable, indicate N/A)	unicut ii not conte	inted in the amenume	nt itscii.
(5)		44 60	
		NIA	
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With a second and a			
Metro			
Market			

The date of each amendment(s) adoption	on: 10/10/12
Effective date if applicable:	10/10/12
	10/10/1V (no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) at for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
	e amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were adopted by action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted laction was not required.	by the incorporators without shareholder action and shareholder
Dated/	0/10/12
selected, by	r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
***************************************	Siry la Sam a (Typed or printed name of person signing)
	Presedent
	(Title of person signing)