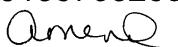
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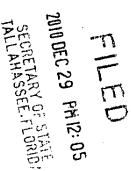
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
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(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION:	CAVALETTI FLOORS COF	RP.		
DOCUMENT NU	MBER:	P10000014448			
The enclosed Articl	es of Amendment and fee a	are submitted for filing.			
Please return all cor	respondence concerning th	is matter to the following:			
_		VALETTI, OSEIRES			
	Ŋ	Name of Contact Person			
-		Firm/ Company			
_	2803 W SLIGH AVE 208				
		Address			
	.,	TAMPA FL 33614			
		City/ State and Zip Code			
	E-mail address: (to be use	ed for future annual report notification)			
NA PAGE					
For further informa	tion concerning this matter,	please call:			
CAVA	LETTI, OSEIRES	at (<u>813</u>) 447	-2453		
Name o	of Contact Person	Area Code & Daytime Telepl	none Number		
Enclosed is a check	for the following amount r	nade payable to the Florida Departm	ent of State:		
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			



RECEIVED 10 DEC 29 AM 9: 31

SECRETARY OF STATE TALLAHASSEE, FLORIDA

December 20, 2010

Oseires Cavaletti 2803 W. Sligh Ave. 208 Tampa, FL 33614

SUBJECT: CAVALETTI FLOORS CORP

Ref. Number: P10000014448

We have received your document for CAVALETTI FLOORS CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign the amendment as the president in the space provided at the bottom of page 3.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 410A00029301

Articles of Amendment Articles of Incorporation of \

FILED

2010 DEC 29 PH 12: 05

CAVALETTI FLOORS CORP (Name of Corporation as currently filed with the Florida Dept. of State CRETARY OF STATE TALLAHASSEE. FLORID! P10000014448 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Florida street address) , Florida (City) (Zip Code) 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>	<u>Name</u>	* Address	Type of Action
D	DOS ANJOS, RAFAEL W	2803 W SLIGH AVE 208 TAMPA FL 33614	_ ☐ Add _ ☑ Remove
<u>D</u>	MARTINS, ONILSON	12407 OAK CEDAR PLACE APT 202 TAMPA FL 33612	_ ☑ Add _ ☐ Remove
	·		_ ☐ Add _ ☐ Remove
E. If amend (attach ad	ling or adding additional Articles, ent dditional sheets, if necessary). (Be spe	er change(s) here: ecific)	
provisi	mendment provides for an exchange, rons for implementing the amendment applicable, indicate N/A)		

The date of each amendment(s) adoption: 12/10/2010			
 Effective daté <u>if applicable</u> :	(date of adoption is required)		
Effective date <u>it applicable</u> .	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.		
	ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):		
"The number of votes	cast for the amendment(s) was/were sufficient for approval		
by	(voting group)		
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder		
sele	o/2010 a director, president or other officer—if directors or officers have not been ected, by an incorporator—if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)		
÷	CAVALETTI, OSEIRES		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of-person-signing)		