11/16/2015



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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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| | MUUI COO. | | | |

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COR AMND/RESTATE/CORRECT OR O/D RESIGN PREMIUM SURFACES INSTALLATION INC

| Certificate of Status | 0 |
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| Page Count | 01 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

TO: Amendment Section

COVERLETTER

| Division of Corpo | rations | | |
|--------------------------|---|--|--|
| NAME OF CORPOR | ATION: PREMIUM SURF | ACES INSTALLATION I | NC |
| DOCUMENT NUMB | ER: P10000023535 | | |
| | of Amendment and fee are su | bmitted for filing, | |
| Please return all corres | pondence concerning this ma | tter to the following: | |
| | DIRCEU HENZ | | |
| ` | | Name of Contact Person | 1 |
| | PREMIUM SURFACES INSTALLATION INC | | |
| • | ···· | Firm/ Company | |
| | 5830 Memorial Hwy Apt 12 | D | |
| • | | Address | |
| | Tampa, Fl. 33615 | | |
| • | | City/ State and Zip Cod | |
| henzp | remium@gmail.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| | | | |
| For further information | concoming this matter, pleas | se call: | |
| DIRCEU HENZ | | at (727 | 520-2792 |
| Name o | Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State; |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Ame Divis P.O. | ing Address ndment Section tion of Corporations Box 6327 hassee, FL 32314 | Amend Divisio Clifton 2661 E | Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301 |

Articles of Amendment to Articles of Incorporation of

| PREMIUM SURFACES INSTALLATION INC | |
|--|--|
| (Name of Cornoration | on as currently filed with the Florida Dept. of State) |
| P10000023535 | • |
| (Docum | nent Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation; | Statutes, this Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the co- | rporation: |
| | The new |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the e | d "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 MUST BE A STREET ADD | |
| | |
| | |
| C. Enter new mailing address, if applicable: | |
| (Mulling address MAY BE A POST OFFICE BO) | خ ≘ : |
| | <u> -</u> 년 현 |
| | <u>유</u> |
| B. 15 | A Manual Advance in Manual Advance in the Advance i |
| D. If amending the registered agent and/or register new registered agent und/or the new registered of | office address: |
| Name of New Registered Agent | |
| | |
| | (Florida street address) |
| New Registered Office Address: | |
| New Assets Court Same Same | (City) (Zip Code) |
| | |
| | |
| New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent. | istered Agent: I am familiar with and accept the obligations of the position. |
| | |
| | |
| vi | ature of New Registered Agent, if changing |
| Signa | aure of vew regimered rigerit, 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 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 Doc | |
|----------------------------|---------------|------------------|----------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u> Title</u> | Name | <u>∧ddres</u> s |
| I) Change | VP | GUSTAVO DA SILVA | 5830 Memorial Hwy |
| X Add | | | Apt 120 |
| Remove | | | Tampa, FL 33615 |
| 2) Change | D | ELIESER C BERRIO | 4127 W. COMANCHE AVE |
| Add | | | TAMPA, FL 33614 |
| X Remove | | | |
| 3) Change | | | |
| | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5)Change | | | |
| | | | - |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Article (Attach additional sheets, if necessary). | (Be specific) |
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| | |
| If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | unge, reclassification, or cancellation of issued shares, address if not contained in the amendment itself: |
| | |
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| | 11/16/2015 |
|---|---|
| The date of each amendment(s) a date this document was signed. | doption:, if other than the |
| ~ | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records. |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval. |
| | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): |
| | t for the amendment(s) was/were sufficient for approval |
| by | (voling group) |
| • • • • • • • • • • • • • • • • • • • | (voling group) |
| The amendment(s) was/were ac action was not required. | lopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/were ac action was not required. | topted by the incorporators without shareholder action and shareholder |
| 11/16/201 | 5 |
| Dated | |
| 6:4 | |
| Signature | director, president or other officer – if directors or officers have not been |
| select | ed, by an incorporator - if in the hands of a receiver, trustee, or other court |
| арроі | nted fiduciary by that fiduciary) |
| | DIRCEU HENZ |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |