P10000082326

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COVER LETTER

TO: Amendment Section Division of Corporations

. NAME OF CORPOR DOCUMENT NUME	RATION: DE PAZ PROF BER: P1000008232		INSTALLATION, INC
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
	spondence concerning this mat	tter to the following:	
ş	CARLOS DE PAZ		
	DE PAZ PROFFES	Name of Contact Person SIONAL CARPET	INSTALLATION INC
		Firm/ Company	
	620 MONICA RO	SE DR 1511	
	ADODKA EL 207	Address	
,	APOPKA FL 327		
•		City/ State and Zip Code	e
		ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
CARLOS DE	PAZ	_{at (} 407	404-8308
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
, Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

2661 Executive Center Tallahassee, FL 32301

Articles of Amendment

to Articles of Inco	orporation
of DE PAZ PROFFESIONAL CARPET INST	TALLATION,INC
(Name of Corporation as currently filed with the Fl	lorida Dept. of State)
P10000082326	
(Document Number of Corporation (if	(known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amountment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "(word "chartered," "professional association," or the abbreviation ".	Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable:	423 TADWOOD DR
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	APOPKA FL 32712
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	423 TADWOOD DR
	APOPKA FL 32712
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
,	
(Florida stre	eet address)
New Registered Office 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)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	. <u>Name</u>	<u>Addres</u> s
1) Change	VP	SAUL MARTINEZ	620 MONICA ROSE DR 1511
Add Remove			APOPKA FL 32703
2) Change Add Remove	VP	LUIS HERNANDES	1738 DAFFODIL DR APOPKA FL 32712
3) Change Add, Remove			
4)Change (Add /Remove			
5) Change Add Remove			
6) Change 'Add Remove			

	s, if necessary). (Be spe	er change(s) here: ecific)		
J				
ł,				
,				
C.				
				······································
If an amendment aray	ides for an exchange, re	classification or cancel	lation of issued share	· c.
тин инспинси ргот	nenting the amendment	if not contained in the a	mendment itself:	751
provisions for implem (if not applicable,	indicate N/A)			
provisions for implen	indicate N/A)			
provisions for implen	indicate N/A)			
provisions for implen	indicate N/A)			
provisions for implen	indicate N/A)			
provisions for implen	indicate N/A)			
provisions for implen	indicate N/A)			
provisions for implen	indicate N/A)			
provisions for implem (if not applicable,	indicate N/A)			
provisions for implen	indicate N/A)			

The date of each amendment(s) adoption: 06/01/2012
Effective date <u>if applicable</u> :	06/01/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) is sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated_06/0	6/2012
Signature	Carlos depor
(Ву	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 ointed fiduciary by that fiduciary)
	CARLOS DE PAZ
•	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

t.