P11000001406

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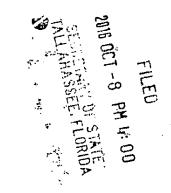
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TRAMSEY

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Amazon Flooring, Inc. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marco Machado Name of Contact Person Amazon Flooring, Inc. Firm/ Company 10337 Fairchild Rd Address Spring Hill, FL 34608 City/ State and Zip Code contact@amazonflooring.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marco Machado 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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

B. A. Car

Amazon Flooring, Inc.		FILED		
(Name o	of Corporation as curren	ntly filed with the Florida Dept.	of State OCT -8	PM 4: 00
P11000001406				
	(Document Number	of Corporation (if known)	JANUARY TALLAHASSEE	
Pursuant to the provisions of section 607.	1006, Florida Statutes, thi	is <i>Florida Profit Corporation</i> ad		
its Articles of Incorporation:	,			*
A. If amending name, enter the new na	me of the corporation:			
			The	Maru.
name must be distinguishable and con, "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corpora	rated" or the abbrevio	
B. Enter new principal office address, if applicable:		10337 Fairchild Rd		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	Spring Hill, FL 34608		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10337 Fairchild Rd		
		Spring Hill, FL 34608		
D. If amending the registered agent an new registered agent and/or the new	v registered office addre		e of the	
Name of New Registered Agent Marco Machado				
	10337 Fairchild Rd			
	(Florida :	street address)		
New Registered Office Address:	Spring Hill		Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if cl			of the position.	
	aval N.	achida		
	Signature of New	Registered Agent, if changing		

ly 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.

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	_Title	Name	<u>Addres</u> s
1) Change	v	Dana Machado	9201 Jasmine Blvd
Add			New Port Richey, FL 34654
x Remove			
2) Change	<u>v</u>	Ana Lourenco Fernandes	10337 Fairchild Rd
X Add			Spring Hill, FL 34608
Remove			
3) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
-			
6) Change			
Add			
Remove			

	amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)
_	
_	
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_	
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_	
_	
_	
<u>If</u> 1	an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)

The date of each amendment(s) adop	don:	_, if other than the
date this document was signed.	2015	
Effective date if applicable:		
A HARMANA	(no more than 90 days after amendment file date)	·····
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirements, this date will truent of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte by the shareholders was/were suffic	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch 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)	
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
10/06/2015		
Dated	land Machado	
selected, b	or, president or other officer — if directors or officers have not been y an incorporator — if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	_
••	•	
Ma	arco Machado	
	(Typed or printed name of person signing)	
Pn	esident	
	(Title of person signing)	