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AUG 10 2015

R. WHITE

#### **COVER LETTER**

TO: Amendment Section Division of Corporations MORNING STAR FLOORING INC NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing, Please return all correspondence concerning this matter to the following: E-mail address! (to be used for future annual report notification) For further information concerning this matter, please call: at (727) 453-1698

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 Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

### **Mailing Address**

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

#### Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment**

to

# Articles of Incorporation

: 0.50

	of 15 AUG - 2-M 4: 11
MORNING STA	
	ntly filed with the Florida Dept. of State)
P110000	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporat" "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
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N7A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	WIA
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	
Name of New Registered Agent	NA
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	Noemir de Lima	2351 E. Mall D
X Add			#212-Ft Myers
Remove			FI 33901
2) Change	.5_	Noemir de Lima	2351 E. Mall Dr
Add			#212- Ft Myers
X Remove			F1 33901
3) Change			
Add			
Remove			
4) Change	<del></del>		
Add			<del></del>
Remove			
5) Change			·
Add			
Remove			
6) Change		<del> </del>	
Add			
Remove			

If amending (Attach addi	g or adding additional Articles, e itional sheets, if necessary). (Be	enter change(s) here: e specific)
	NIA	<del>}</del>
	1-1/-	•
·····		
·		
provisions	dment provides for an exchange, s for implementing the amendme applicable, indicate N/A)	e, reclassification, or cancellation of issued shares, ent if not contained in the amendment itself:
(ij noi	• •	J/A
·	<i>\</i> ^	×(/ <sup>-3</sup>
	····	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	7 27	2015	, if other than the
date this document was signed.			
Effective date if applicable:	727	2012	
(1)	no more than 90	days after amendmen	t file date)
Note: If the date inserted in this block does not a document's effective date on the Department of Sta		able statutory filing re-	quirements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)		
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for appr		number of votes cast fo	or the amendment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gro			
"The number of votes cast for the amendm			1
by	· · · · · · · · · · · · · · · · · · ·		" -'
(voting	group)		
The amendment(s) was/were adopted by the boa action was not required.	ard of directors v	without shareholder ac	tion and shareholder
☐ The amendment(s) was/were adopted by the incoaction was not required.	orporators witho	out shareholder action a	and shareholder
Dated +27 20	015		
Signature (By a director, presider	rilson	Zefoem.	pers have not been
selected, by an incorpo			
appointed fiduciary by	that fiduciary)		
	Vanil	son Zeferi	no
(Ту	ped or printed n	ame of person signing	)
Annual Control of the		sident	
	(Title o	f person signing)	