P11000038338

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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: MIRACLE FUR	NITURE INC		
	BER: P11000038338			
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all corr	espondence concerning this m	natter to the following:		
	LUZ M GONZALEZ			
		Name of Contact Perso	on	
		Firm/ Company		
	7534 N ARMENIA AVE			
	TAMPA, FL 33604	Address		
		City/ State and Zip Cod	de	
STM	UNOZ05@GMAIL.COM			
	E-mail address: (to be u	ised for future annual report	notification)	
	n concerning this matter, plea) de & Daytime Telephone Numb	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
Enclosed is a check fo	r the following amount made ☐\$43.75 Filing Fee & Certificate of Status	payable to the Florida Depa □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	

Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

MIRACLE FURNITURE INC (Name of Corporation as currently filed with the Florida Dept. of State) P11000038338 (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 (Florida street address) New Registered Office Address: (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 = ChiefExecutive 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	ÐΤ	L. D.		
-		John Doe		
X Remove	Y	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	BLANCA GONZALEZ	18802 FLAGSTONE CREEK RD	
X Add			HOUSON, TX 77084	
Remove				
2) Change	CEO	Stephanie Munoz	10715 Moonlight Mik Wa	
Remove			Rincryical, FE, 33579	
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
5) Change				
Add				
Remove				

	, if necessary).	eles, enter change(s) here: (Be specific)	
			
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D 0220000000000000000000000000000000000	<u>s for an exchan</u>	ge, reclassification, or cancellation of	f issued shares,
n amendment provide: ovisions for implement	ting the amenda	Dent if not contained in the	
n amendment provides ovisions for implement (if not applicable, indi	ting the amendi	ge, recissification, or cancellation of the amendment if not contained in the amendment	ent itself:
n amendment provide ovisions for implement (if not applicable, ind	ting the amendi licate N/A)	nent if not contained in the amendm	ent itself:
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The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	its, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amby the shareholders was/were sufficient for approval.	iendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	ng statement ent(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and s action was not required.	shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	holder
Dated	
Signature (By a director, president or other officer – if directors or officers have	
(By a director, president or other officer – if directors or officers have	not been
selected, by an incorporator – if in the hands of a receiver, trustee, or cappointed fiduciary by that fiduciary)	other court
LUZ M GONZALEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	