## P1200054401

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |

Office Use Only



000250833200

08/23/13--01004--011 \*\*35.00

AUG 27. 2013
R. WHITE



## COVER LETTER

TO: Amendment Section
Division of Corporations

| Division of Corpo   | orations                                    |  |  |  |  |  |
|---|---|--|--|--|--|--|
| NAME OF CORPOR  | RATION: Routhier Cu                         | stom Interiors Inc   | orporated  |  |  |  |
| DOCUMENT NUMBER: P12000054401   |   |  |  |  |  |  |
|   |   |  |  |  |  |  |
| The enclosed Articles of Amendment and fee are submitted for filing.                          |   |  |  |  |  |  |
| Please return all correspondence concerning this matter to the following:                     |   |  |  |  |  |  |
| Stephan Routhier  |   |  |  |  |  |  |
|   | Name of Contact Person                      |  |  |  |  |  |
|   | Routhier Custom Interiors Incorporated      |  |  |  |  |  |
|   | 0404   -1 14/-                              | Firm/ Company  | - 000  |  |  |  |
|   | 8461 Lake Wo                                |  | e 208  |  |  |  |
|   | Laka Marth El                               | Address  |  |  |  |  |
|   | Lake Worth, Fl                              | City/ State and Zip Cod  |  |  |  |  |
|   |   | ,  | t:   |  |  |  |
| ste   | phan @rcinteri                              | ors.me   | ····   |  |  |  |
| E-mail address: (to be used for facure annual report notification)                            |   |  |  |  |  |  |
| For further information concerning this matter, please call:                                  |   |  |  |  |  |  |
|   |   |  |  |  |  |  |
| Stephan Ro  |   | <sub>at (</sub> 561  | 951-1551   |  |  |  |
| Name o  | of Contact Person                           | Area Co  | de & 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 & 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) |  |  |  |
|   | ling Address<br>endment Section             |  | Address<br>Iment Section   |  |  |  |
|   | 1 0.00                                      | -···   | *  |  |  |  |

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

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

Articles of Amendment Articles of Incorporation

門上夏夏 AUG 23 PH 4: 26

## Routhier Custom Interiors Incorporated

(Name of Corporation as currently filed with the Florida Dept. of State)

| P1 | 12 | N | N | N | N | 54  | 14 | n | 1 |
|----|----|---|---|---|---|-----|----|---|---|
|    | Z. | U |   | U | u | ·/- | _  | u |   |

(Document Number of Corporation (if known)

dment(s) to

| ame must be distinguishable and con  | ntain the word "corporation," "company," or   | "incorporated" or the al            |
|--|---|-------------------------------------|
| Corp.," "Inc.," or Co.," or the design<br>ord "chartered," "professional associa | nation "Corp," "Inc," or "Co". A professional<br>ntion," or the abbreviation "P.A." | corporation name must (             |
| B. Enter new principal office address,   |   |                                     |
| Principal office address <u>MUST BE A S</u>                                      | STREET ADDRESS )  | - Arrent                            |
|  |   |                                     |
| . Enter new mailing address, if appl   | licable:  |                                     |
| (Mailing address MAY BE A POST   |   |                                     |
|  |   | ····                                |
|  |   |                                     |
| . If amending the registered agent a   | nd/or registered office address in Florida, enter                                   | the name of the                     |
|  |   |                                     |
| new registered agent and/or the ne   | Sergio Oliver   |                                     |
|  | Sergio Oliver   | <br>08                              |
| new registered agent and/or the ne   | Sergio Oliver   | 08                                  |
| new registered agent and/or the ne   | Sergio Oliver  8461 Lake Worth Road Suite 2  (Florida street address)               | 08<br>, Florida 33467<br>(Zip Code) |

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          | Address                        |  |  |  |
| 1) Change                  | VP           | Sergio Oliver | 8461 Lake Worth Road Suite 208 |  |  |  |
| X                          |              |               | Lake Worth FI 33467            |  |  |  |
| Remove                     |              |               |                                |  |  |  |
| 2) Change                  |              |               |                                |  |  |  |
| Add                        |              |               |                                |  |  |  |
| Remove                     |              |               |                                |  |  |  |
| 3) Change                  |              |               |                                |  |  |  |
| Add                        |              |               |                                |  |  |  |
| Remove                     |              |               |                                |  |  |  |
| 4) Change                  |              |               |                                |  |  |  |
| Add                        |              |               |                                |  |  |  |
| Remove                     |              |               |                                |  |  |  |
|                            |              |               |                                |  |  |  |
| 5) Change                  | <del></del>  |               | <u> </u>                       |  |  |  |
| Add                        |              |               |                                |  |  |  |
| Remove                     |              |               |                                |  |  |  |
| 6) Change                  |              |               |                                |  |  |  |
| Add                        |              |               |                                |  |  |  |
| Remove                     |              |               |                                |  |  |  |

| Attach additional sheets, if necessary).   | icles, enter change(s) here:<br>(Be specific)   |              |
|--|---|--------------|
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   | ·            |
|  |   | ,            |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  | ,   |              |
|  |   |              |
|  |   | <del></del>  |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
| 16   | t us luvuifisation on assaultation of issued sho  | ***          |
| If an amendment provides for an exch<br>provisions for implementing the ame                                      | hange, reclassification, or cancellation of issued sha  | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| If an amendment provides for an exch<br>provisions for implementing the ame<br>(if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res <u>.</u> |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued sha<br>endment if not contained in the amendment itself: | res,         |

| The date of each amendment(s) adoption:  | , if other than the |
|--|---------------------|
| date this document was signed.   |                     |
| Effective date if applicable: (no more than 90 days after amendment file date)   | <del></del>         |
| ,,,,,,,,,,,,,,,,,,,,,,,  |                     |
| Adoption of Amendment(s) (CHECK ONE)   |                     |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.   |                     |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): |                     |
| "The number of votes east for the amendment(s) was/were sufficient for approval  |                     |
| by"  (voting group)  |                     |
| (voting group)   |                     |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  |                     |
| ■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |                     |
| Dated 8/19/13  |                     |
| Simon Start All M  |                     |
| Signature  (By a director, provident or other officer – if directors or officers have not been   |                     |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)   |                     |
| Stephan Routhier   |                     |
| (Typed or printed name of person signing)  |                     |
| President  |                     |
| (Title of person signing)  |                     |