P12000058704

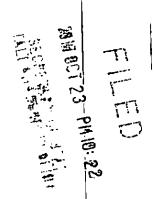
(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



200303407392

09/14/17--01009--003 **35.00



Amind

OCT 2 4 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: IMPER	ial Home	Products, INC
DOCUMENT NUMBER: P1200	0058704	
The enclosed Articles of Amendment and fee are su	abmitted for filling.	
Please return all correspondence concerning this ma	tter to the following:	
ORIANDO ORIANDO Abfoti.ihp@ at E-mail address: (to be us	Firm Company Nd Lake R Address Florida City State and Zip Code St. Net sed for future annual report	JORD POSES
For further information concerning this matter, pleas	se call:	
Andrew Beat Foti Name of Contact Person	at 407	1816-1414
Name of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment 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 ment Section n of Corporations Building xecutive Center Circle

2661 Executive Center Circle Fallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

September 15, 2017

ANDREW BERT FOTI IMPERIAL HOME PRODUCRS INC 1913 SAND LAKE ROAD ORLANDO, FL 32809

SUBJECT: IMPERIAL HOME PRODUCTS, INC.

Ref. Number: P12000058704

We have received your document for IMPERIAL HOME PRODUCTS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

The document must have original signatures.

You failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If your have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton

Regulatory, Specialist II

Letter Number: 817A00018832

Articles of Amendment 10

	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	•
Articles of A	mendment
to Articles of Inc	mendment corporation S. INC. Iv filed with the Florida Dept. of State)
of	
Imperial Home Products (Name of Corporation as current)	S, INC.
P12000058704	(* · · · · · · · · · · · · · · · · · ·
	f Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Statutes, this is Articles of Incorporation.	Florida Profit Corporation adopts the following amendment(s) to
. 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
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	1913 SAND LAKE ROAD
	ORIANDO, FIDAIDA 30809
7. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	P.O. Box 36385
	San Juan P.K. 00736.
. If amending the registered agent and/or registered office addr	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent Andrew Ber	t Foti
1913 W. SAN	dlake Road
New Registered Office Address: QRIANDO	1. Florida 32809
. —	(City) (Zip Code)
Sew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	
Signature of New R	Registered Agent, if changing

address of each Office (Attach additional shee Please note the officer: P = President; V = Vic Executive Officer: CFC held. President, Treasu Changes should be not a change, Mike Jones of Mike Jones, V as Remo	er and/or 15 ts, if necess director tit, we Presiden O = Chief if over, Direct ed in the followers the c	sary) le by the first letter of the office title, t: T= Treasurer; S= Secretary; D= Dire Financial Officer. If an officer/director	vetor, TR= Trustee; C = Chairman holds more than one title, list the j listed as the PST and Mike Jones is	or Clerk; CEO = Chief first letter of each office listed as the V. There is
Example: X Change	<u> 174</u>	John Doe		
X Remove	\underline{V}	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>	
1) Change				1
Add				
Remove				
2) Change	·- · =			
Add				
Remove				
3) Change		-		<u> </u>
Add				
Remove				·
4) Change				
Add				
Remove				
5) Chanca				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Articles, enter change(s) here. Mach additional sheets, if necessary) — (Be specific)	1
мяся ананата месть, у несеямагут — (ве мресую)	1
	\
	
	į
¬	
	1
	<u> </u>
	
an amandment negrida for an arabanca mada if ari a an an Usi	
an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amend	mont it alf
(if not applicable, indicate NA)	inchensen.
, , , , , , , , , , , , , , , , , , , ,	

The date of each amendment(s) adoption: $9-5-30/7$ date this document was signed.	if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records.	of be listed as the
Adoption of Amendment(s) (CHECK ONE)	1
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	1
☐ 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):	i
"The number of votes cast for the amendment(s) was were sufficient for approval	
by	'
(voting group)	ı
☐ 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.	
Dated10-7-17-	
Signature	
(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 other court appointed fiduciary by that fiduciary)	
Andrew Bert Foti (Typed or printed name of person signing)	
President	
(Title of person sommer	