P13000059342

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COVER LETTER

Division of Corporations SANTA RUSA WOOD FLORING INC NAME OF CORPORATION: 13000059342 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person 9996 Seminale Bluch
Address E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Susan J. GEIGER at (727) 392-2120

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: \$43.75 Filing Fee & Certificate of Status □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

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

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

SANTA RUSA WOO	D FLEGRING- I	- -~ C
	filed with the Florida Dept. of State)	
P13000054342		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	lorida Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of the corporation:		
RUSA ENTERPRISES	Inc	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the o". A professional corporation name m.A."	nust contain the
B. Enter new principal office address, if applicable:	6330 99 Th Liny	N HIYB
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	5t. Petersburg F	= 4 33708
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		22
(Studing dutress MAT BE A POST OFFICE BOX)		 5
	Samk.	
		유럽 :
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the	3 COS
new registered agent and/or the new registered office address:		PM S
Name of New Registered Agent GARRICK	J. Lynch	5: C
	male Bird _	90 90 Y. LION.
(Florida stree		
New Registered Office Address: Seminale		33772
	City)	(Zip Code)
Now Designated Appends Company of the print Designation		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the positi	ion.
1 = 22 - 1	\searrow	
Signature of View Day	gistered Agental changing	
Signature of New Res	sistered 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:

(Atlach 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 <math>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: XChange	<u>PT</u> <u>J</u>	ohn Doe	
X Remove	<u>v</u> <u>n</u>	dike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	NATALIE SANTA ROSA	6330 99 th Way 1V \$149 St. Pelasby FL
X Add			St. Pelasby FL
Remove			33708
2) Change	<u>V</u>	NATA SANTA ROSA	6330 98th Way N # 1403 St. Petersburg FL 33708
Add			St. De tersburg FL 33708
Remove			
3) Change			
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amend</u>	ing or adding a	additional Artic	les, enter change(s	<u>s) here</u> :			
(Attach ad	iditional sheets,	if necessary).	(Be specific)				
		NIA	NONE				
			-				
							
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F. If an ame	endment provid	des for an excha	nge, reclassificatio	on, or cancellatio	an of issued shar	res	
<u>provisio</u>	<u>ns for impleme</u>	enting the amen	dment if not conta	ined in the ame	ndment itself:		
(if n	ot applicable, i	ndicate N/A)	,				
	NA		NONE	-			
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<u>.</u>		_ 		.		·	
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The date of each amendment(s) adoption: date this document was signed.	1-01-2019	, if other than the
Effective date <u>if applicable</u> :	1-01-2019 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department of	ot meet the applicable statutory filing requirements, th	
Adoption of Amendment(s) (CH	IECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amenda approval.	nent(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	e shareholders through voting groups. The following starting group entitled to vote separately on the amendment(s):	atement
"The number of votes cast for the amer	ndment(s) was/were sufficient for approval	
by	ing group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and share	holder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	er
	ident or other officer – if directors or officers have not be orporator – if in the hands of a receiver, trustee, or other	
appointed fiduciary		
N	TATA SANTA RESA (Typed or printed name of person signing)	
•	(Typed or printed name of person signing)	
	VΡ	<u></u>
	(Title of person signing)	