## P136608 86919

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone #	)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name	)
(Do	ocument Number)	
Certified Copies	_ Certificates of	f Status
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September 21, 2017

JUDITH BOATWRIGHT WE B FLOORS INC 14645 SE 55TH AVE SUMMERFIELD, FL 34491

SUBJECT: WE B FLOORS INC. Ref. Number: P13000086919

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

We are enclosing the proper form(s) with instructions for your convenience.

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

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

Susan Tallent Regulatory Specialist II

Letter Number: 917A00019153

www.sunbiz.org

## COVER LETTER

TO: Amendment Section Division of Corporations

	,	2 61	•	
NAME OF CORPORA	TION: Lie	5 Hours	INC	
DOCUMENT NUMBER	DOCUMENT NUMBER: <u>P13000086919</u>			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ndence concerning this mat	tter to the following:		
	Judit	Name of Contact Perce	41	
·	<u> </u>	B floors	inc	
		Firm/ Company		
	6551 SE	110 Th Street	# 125	
	. <b>.</b> .	F/ 34420 City/ State and Zip Cod		
	Belleview	+1 34420		
		City/ State and Zip Cod	e	
E-mail address: (to be used for future annual report notification)				
	E-mail address: (to be us	ed for future annual report	notification)	
For further information concerning this matter, please call:				
Hibul	Partialis	353	5470-8655	
Name of (	Contact Person	Area Co	970-8652 de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee	Taka sanggarang			
S32 Fling Pec	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy	☐S52.50 Filing Fee Certificate of Status	
		(Additional copy is	Certified Copy	
		enclosed)	(Additional Copy	
			is enclosed)	
Mailing Address Street Address				
	ment Section		ment 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

to

## Articles of Incorporation of

, ,	
We B +	loors inc.
Name of Corporation as curre	ently filed with the Florida Dept. of State)
- P130000	86919
	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corpora" (Corp., ""Inc.," or Co.," or the designation "Corp.," "Inc.," o word "chartered," "professional association," or the abbreviation	ntion," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
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)	6551 SE 110th St # 125
•	Belleview Fl 34420
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the
Name of New Registered Agent	
(riorida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	'-4 '0
I hereby accept the appointment as registered agent. I am familia	with and accept the obligations of the position.
	PH D
Signature of New	v 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> .	John Dog	
X Remove	<u>v</u>	Mike Jones	
X Add	$\underline{sv}$	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>U</u>	Christophen Sudberry	
Add Remove			Swanner Field Fl 34491
2) Change	D	Clarence Sudberry	6551 SE /10th st
X Add			# 125
Remove			Belleview fl 34420
3 ) Change	<del></del>		
Add			<del></del>
Remove			
4) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
interior distribution in the contract of the c	
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<del></del>	170.74
48 - 4 - FM	
	,
f an amandmant nearliber for an aval	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<del></del>	
<u> </u>	

The date of each amendment(s) as	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	9-28-17	
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the	ec amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The foleach voting group entitled to vote separately on the amer	llowing statement ndment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voling group)	
	(voung group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and	shurcholder
Dated 9	-28-17	
Signature	themitros Mebers	
(By a di	rector, president or other officer - if directors or officers	have not been
	<ul> <li>f, by an incorporator – if in the hands of a receiver, trusted ed fiduciary by that fiduciary)</li> </ul>	e, or other court
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	· <del>-</del>
	President	
	d'itle of person signioni	· <del></del>