## P130000 90206

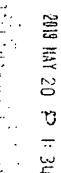
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(0.0)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Sertificates of States
Special Instructions to Filing Officer:

Office Use Only



500329389335

05/20/19-+01024-+011 ++52.58



: 관

·": " .I7 1

COC 9 HGG.

## COVER LETTER

**TO:** Amendment Section Division of Corporations

SCHWAKIZMAN G INC NAME OF CORPORATION:					
	P1300009020	6			
DOCUMENT NUMB	SER:	··			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	GARY SCHWARTZMAN				
	SCHWARTZMAN G INC	Name of Contact Person			
	2001 BISCAYNE BLVD	Firm/ Company			
	Address MIAMI, FL, 33137				
	City/ State and Zip Code				
GAR	Y@DECORANDCOMFORI	г.сом			
<del></del>		sed for future annual report			
	E-mail address: (to be us	sed for future annual report i	notification)		
For further information	concerning this matter, pleas	se call:			
GARY SCHWARIZMAN		718	4965209		
		at (			
Name o	of Contact Person	Area Coc	le & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depar	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		Amendi Division Clifton 266 F Ex	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

## **Articles of Amendment** to Articles of Incorporation

	Articles of Incorporation
SCHWARTZMAN G INC	of the state of th
(Name of Corpora	ation as currently filed with the Florida Dept. of State)
P13000090206	2019 HAY 20 ₱ 1: 34
(Doc Pursuant to the provisions of section 607.1006, Flor ts Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the	e corporation:
	The new
•••	vord "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applical	ble:
Principal office address MUST BE A STREET A	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE E	<u></u>
	<del></del>
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered.</li> </ol>	stered office address in Florida, enter the name of the
new registered agent and of the new registere	eu office audi ess.
Name of New Registered Agent	
	(Florida street address)
	(Tillian sirees mairessy
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing R	
	t. I am familiar with and accept the obligations of the position.
Si	ignature 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 = 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	SV	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		EUGENE SHARGORODSKY	2063 BISCAYNE BLVD, C 101
			MIAMLFL.33137
X Remove			
		LARISA VORONIN	17201 COLLINS AVE
2) Change			APT1403
Add			SUNNY ISLES BCH,FL,33137
Remove 3) Change			-
Add			148
X Remove			
		YURY SHARGORODSKY	17201 COLLINS AVE
4) Change		_	APT1403
X Remove			SUNNY ISLES BCH.FL.33160
5) Change			
Add			
Remove			<del> </del>
6) Change		_	
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
<u></u>	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(afficient for approval.	s)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast ALL OF THE SHAR by	for the amendment(s) was/were sufficient for approval EHOLDERS	
<i></i>	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sharehold	er
action was not required.	opted by the incorporators without shareholder action and shareholder	
5/1 <b>7/2</b> 019		
DatedSignature		
	irector, president or other officer - if directors or officers have not been	
	<ul> <li>d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary)</li> </ul>	rt .
иррош	GARY SCHWARIZMAN	
	(Typed or printed name of person signing) PRESIDENT	<u> </u>
	(Title of person signing)	