Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000257636 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I2000000019

: (305)552-5973

Fax Number

: (305)220-1440

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN LARGAESPADA KITCHEN CABINET CORP

Certificate of Status	0
Ccrtified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

MON 55 5013

H. WHITE



10/03/2031 05:47 11/20/2013 05:25

3055584835

RAFAEL ACCOUNTING

#2872 P.002/005 PAGE 02/05

H13000257636

13 粉7 21 居日: 42

Articles of Amendment to Articles of incorporation of

SECRETARY OF STATE TALLAHASSEE, FLORIDA

LARGAESPADA KITCHEN CABINET CORP
(Name of Corporation as currently filed with the Florida Dept. of State)
P13000093315
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartured," "professional association," or the abbreviation "P.A."
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)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agant
(Florida street address)
New Registered Office Address:, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Standing of New Recistored Agent of changing

Page 1 of 4

#2872 P.003/005 PAGE 03/05

H13000257638

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:

3055584835

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 hald. President, Treusurer, 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	PI	John D	koe	
X Remove	<u>v</u>	Mike J	ones	·
X Add	<u>sv</u>	Sally S	smith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	PT		ANDY W LARGAESPADA	1775 W 41 ST APT 1-C
Add				HIALEAH FL 33012
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				·
Remove				
4) Change				
∏_`Ada		7. -		
Remove				
5) Change			•	
Add				·
Remove				
6) Change				
Add			•	
Remove				

Page 2 of 4

H13000257838

Attach additional sheets, if necessary). (Be specific)		
	<u> </u>	
		
•	•	
I 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)		
·	·	
·		

H13000237336

The date of each amendments	(s) adoption: 11/20/2013	, if other than the
date this document was signed.		if outer that the
Effective date <u>if applicable:</u>	11/20/2013	
MANUAL DESIGNATION OF THE PROPERTY OF THE PROP	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wern by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
*The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer- action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated_11/2	0/2013	
Signature _	dellemide	
Se	y a director, president or other officer — if directors or officers have not been lected, by an incorporator — if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	_
	EDITH MIRANDA	
	(Typed or printed name of person signing)	
•	PRESIDENT	
	(Title of person signing)	_