## P13000093904

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	ne #)
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION: KC KARPET, INC	<u> </u>	
	UMBER: P13000093904		
	icles of Amendment and fee are su	bmitted for filing.	
Please return all o	orrespondence concerning this ma	tter to the following:	
	KEZIAH CRAIB		
		Name of Contact Person	1
	KC KARPET, INC		
		Firm/ Company	-
	2305 TREETOP LANE		
		Address	
	KISSIMMEE, FL 34746		
		City/ State and Zip Code	E
	KCKARPET@LIVE.COM		
	E-mail address: (to be us	sed for future annual report	notification)
	•		
For further inform	nation concerning this matter, plea	se call:	
KEZIAH CRAIB		at (407	de & Daytime Telephone Number
N	ame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fo	Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fcc 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 The Co	Address Iment Section In of Corporations Contre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

KC KARPET, INC		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
P13000093904		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following	ng amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must conto	ion "Corp.," ain the word
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		2020
		<b>房</b> 市
		<del></del>
C. Enter new mailing address, if applicable:		œ . 
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>
•	· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	dress in Florida, enter the name of the	
Name of New Registered Agent		_
(Florida s	treet address)	<del></del>
New Registered Office Address:	, Florida	
Hew Neglister ed Office Maress.	(City) (Zip	Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	nt: - with and accept the obligations of the position.	
Signature of New	Registered Agent, if changing	_
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	) (e), F.S.	

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 Doc	<u> </u>
X Remove	<u>v</u>	Mike Jones	Pa
X Add	<u>sv</u>	Sally Smith	 •• 
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change	P	ANDREW SOLOMON	2305 TREETOP LANE
Add			KISSIMMEE, FL 34746
X Remove	P	LOUTRICIA GIBBS TOLBERT	1561 CRABAPPLE COVE CT
2) Change X	-	Edd I de la Company de la Comp	NORTH JACKSONVILLE, FL 32:
Add		•	NORTH JACKSON VIBEL, 1 B 32.
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary). (Be specific)	
	020 5
	# EC
	co
	E
<del>-</del>	••
an amendment provides for an exchange, reclassification, or cancellation	n of issued shares,
rovisions for implementing the amendment if not contained in the amen	dment itself:
(if not applicable, indicate N/A)	

•

The date of each amendment(s) adop	12/14/2020 tion:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	data
	(no more than 90 days after amenament file t	iale)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirement of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffic	l by the shareholders. The number of votes cast for the lent for approval.	e amendment(s)
must be separately provided for eac	ed by the shareholders through voting groups. The folion in voting group entitled to vote separately on the amendate the amendment(s) was/were sufficient for approval	
by	(voting group)	8 1
Dated 12/14/	12020	
Signature 9	or, president or other officer – if directors or officers h	O vovo not been
selected, by	or, president of other officer – it directors of officers in an incorporator – if in the hands of a receiver, trustee iductary by that fiductary)	
	(Typed or printed name of person signing)	

(Title of person signing)