P 14000016334

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
	WAIT	
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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14 MAR 18 AM 8: 44
SECKETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 1 9 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

URIEL CARP	ET INSTALLATION ,	CORP
P14000016334 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
ALDRIN ORTEGON		
URIEL CARPET INST	Name of Contact Person FALLATION, CORP	
11401 PENDLENTON	Firm/ Company NST	
BONITA SPRINGS	Address L 34135	
	City/ State and Zip Code	•
URIELCARPET@GMAIL.	COM	
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	١
ALDRIN ORTEGON	239 at (200 6049
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	urtment of State:
\$35 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	Street Address Amendment Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

in them with the

URIEL CARPET INSTALLATION	, CORP		14 MAR 18	BM 9-1.5
	urrently filed with the Florida	a Dept. of State)		
P14000016334			SECRETARY TALLAHASSE	of STATE F FLORINA
(Document)	Number of Corporation (if know	wn)		C, I LUMDA
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this <i>Florid</i>	da Profit Corporation ad	lopts the following	amendment(s)
A. If amending name, enter the new name	e of the corporation:			
N/A				The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional association	on "Corp," "Inc," or "Co".	A professional corpora	orated" or the ab stion name must c	breviation ontain the
B. <u>Enter new principal office address, if a</u> (Principal office address <u>MUST BE A STR</u>				
	_			
C. Enten new mailing address if applica				
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF				
D. If was all and the state of				
D. If amending the registered agent and/or new registered agent and/or the new r		i Florida, enter the nam	e of the	
Name of New Registered Agent	I/A			
				
_	(Florida street add	dress)		
New Registered Office Address:		, Florida		
Her Registered Office Hudress.	(City)	, rioliua_	(Zip Code)	
New Registered Agent's Signature, if char	nging Registered Agent:			
hereby accept the appointment as registere	ed agent. I am familiar with a	nd accept the obligations	s of the position.	
Signa	ture 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 Do	<u>De</u>	
X Remove	¥	Mike Jo	<u>ones</u>	
X Add	<u>\$V</u>	Sally St	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	CEO)	JOSUE REGALADO	11401 PENDLENTON ST
Add		_		BONITA SPRINGS
Remove				FL 34135
2) Change				
Add				
Remove				
3) Change		- -		
Add				
Remove				
4) Change	·	_		
Add				
Remove				
5) Change	<u></u> ,			
Add				
Remove				
6) Change				
Add				
Remove				

E. <u>If amending or adding additional Articles, enter change(s) here</u> : (Attach additional sheets, if necessary). (Be specific) N/A				
· · · · · · · · · · · · · · · · · · ·				
	1 10 10 10 10 10 10 10 10 10 10 10 10 10			
	. , ,			
F. If an amendment provides for an exchange, reclassificate provisions for implementing the amendment if not con (if not applicable, indicate N/A)	tion, or cancellation of issued shares, tained in the amendment itself:			
N/A				
NAME AND ADDRESS OF THE PARTY O				

The date of each amendment(s) add	03/13/2014 option:	_, if other than the
date this document was signed.	2/2014	
Effective date <u>if applicable</u> :	(3/2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	pted by the incorporators without shareholder action and shareholder	
03/13/20 Dated	14	
Signature 701	dran & Ortegon	
(By a disselected	rector, president or other officer – if directors or officers have not been i, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	_
	ALDRIN ORTEGON	
-	(Typed or printed name of person signing)	_
·	PRESIDENT	
-	(Title of person signing)	
		٠ .
	CRETARY O	14 MAR 18
	TORDA	# 55 89 55