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(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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COVER LETTER

TO: Amendment Section
Division of Corporations

	RATION: ROYAL FL		TIONS, INC
DOCUMENT NUME	BER: P1400003906	§7	
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	DENIS GOMEZ		
•	DOVAL ELOOPU	Name of Contact Perso	
	ROYAL FLOORI	NG SULUTIONS	5, INC
		Firm/ Company	
	15310 NW 31ST	AVE	
•		Address	
	OPA LOCKA, FL	33054	,
•	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	e
Eei		CACOMOAST	NET
	PINOZACINTHIA	sed for future annual report	
	E-man address. (to be de	sed for future annual report	·
For further information	concerning this matter, pleas	se call:	
CINTHIA ESPINOZA at (786) 973-5279			
Name of Contact Person Area Code & Daytime Teleph			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	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 Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle eassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

ROYAL FLOORING SOLUTIONS, INC

 $(\mathcal{N}_{i}, \mathbf{f}_{i}, \mathbf{f}_{i}) = 0$

(Name of Corporation as currently filed with the Flo	rida Dept. of State)	~		
(Document Number of Corporation (if I	cnown)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Frits Articles of Incorporation:	,	ing amer	ndmen	ıt(s) to
A. If amending name, enter the new name of the corporation:				
		The		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name mus	abbrevii t contaii	ation n the	
B. Enter new principal office address, if applicable:	15310 NW 31ST AVE			
(Principal office address MUST BE A STREET ADDRESS)	OPA LOCKA, FL 33054	~		
		_		
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 addres	s in Florida, enter the name of the	-	14	
new registered agent and/or the new registered office address:		;	SEP	
Name of New Registered Agent			29	
(Florida street	ı address)		中田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田	Ö
New Registered Office Address: (City)	, Florida(Zip Code)		<u>2</u>	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit				

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>oe</u>		
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title		Name	Address	
1) Change	D		GOMEZ, DENIS	15310 NW 31ST AVE	
Add				OPA LOCKA, FL 33054	
Remove					
2) Change	Р		GOMEZ, DENIS	15310 NW 31ST AVE	
Add				OPA LOCKA, FL 33054	
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change					
Add		_			
Remove					

. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
J/A	
·	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
/A	

date this document was signed.	ption:	, if other than un
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated_09/09/201	4	
Signature O	ctor, president or other officer – if directors or officers have not been	
selected,	by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)	
	Denis Gomez	
	(Typed or printed name of person signing)	_
_	President	·-
_	(Title of person signing)	