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.

(((H24000382048 3)))



H240003820483ABC+

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 : ACCOUNT BOOKKEEPING CORP

Account Number : I20120000055 Phone : (407)898-1757 Fax Number : (407)897-5336

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

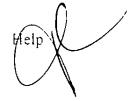
Email Address: Support Dabkcorp. com

COR AMND/RESTATE/CORRECT OR O/D RESIGN FALCON FLOORING INC

THE TOTAL OF THE CONTRACT WAS A PROPERTY ASSESSED.	EL MANUELLA SISTEMA A POR ESSAGES TITALIANA
. Certificate of Status	
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



COVER LETTER

TO: Amendment Sec Division of Corp				
NAME OF CORPO	RATION: FALCON FLOOR	ING INC		
DOCUMENT NUM	D14000012002			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	LETICIA SANTOS			
		Name of Contact Persor	<u> </u>	
	ABK CORP			
	,	Firm' Company	• • • • • • • • • • • • • • • • • • • •	
	5301 CONROY ROAD SUIT	TE 140		
		Address		
	ORLANDO FL 32811			
		City/ State and Zip Code	>	
SUPPORT@ABKCORP.COM			1024 SE (
	E-mail address: (to be us	sed for future annual report	notification)	NO NO
For further informatic	on concerning this matter, pleas	se call:		2024 NOV 18 AM 10: 54 SEGNI ANASSEE, FIL
SUPPORT@ABKCORP.COM		at (407	S98-1757 ie & Daytime Telephone Num	
Name	of Contact Person	Area Coo	ic & Daytime Telephone Nun	iber TE 5
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State;	15
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	SS2.50 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		Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810	

Tallahassee, FL 32303

Page:

11/18/2024 11:04 AM

TO:18506176380 FROM:4078975336

Articles of Amendment Articles of Incorporation οſ

(Name	of Corporation as curren	itly filed with the Florida Dept. of State)	
P14000042888			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new n	anie of the corporation:		
ALCON GENERAL SERVICES, INC	0		The new
name must he distinguishable and contain "Inc.," or Co" or the designation "("chartered," "professional association."	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation A professional corporation name must contain 1."	n "Corp" the word
3. Enter new principal office address,	if applicable:	8411 GARDNER RD	
(Principal office address MUST BE A STREET ADDRESS)		TAMPA FL 33635	
			·
Enter new mailing address, if appl		8411 GARDNER RD	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		TAMPA FL 33635	~
			
			= 3
		dress in Florida, enter the name of the	2024 NOV 18
new registered agent and/or the ne-		<u> 1951:</u>	
Hame of New Registered Agent	FABIANO ALVES		AM IO: 54 SSEE, FIL
	8411 GARDNER RD		
	(Florida :	street address)	77 6
	TAMPA , Florida 3363		
New Registered Office Address:		(City) (Zip C	indul.

I hereby accept the appointment as registered agent. I am familiar with and accept the abligations of the position.

Y Jaleus Place 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	
X Remove	\underline{v}	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
I) Change	P	FABIANO ALVES	8411 GARDNER RD
X Add			TAMPA , FL 33625
Remove			
2) Change			- - 6
Add			TOZIL NOV
Remove 3) Change			
Add			<u>'</u>
Remove			SSEE. S
4) Change			FI.
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			-
Add			
Remove			

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F.	If 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>
_		
_		· · · · · · · · · · · · · · · · · · ·

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The date of each amendment(s) adoption:	, if other tha	in the
date this document was signed.		
Effective date if applicable:		
(no more than 90 days after amendment file date)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed	as the
Adoption of Amendment(s) (CHECK ONE)		
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	. shareholder	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.		
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	2024 See	
"The number of votes cast for the amendment(s) was/were sufficient for approval	2024 NOV	
by	∯ 6	
Dated	AH 10: 54	O
Signature x Jahren Mues (By a director, president or other officer – if directors or officers have not been	54	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)		
FABIANO ALVES		
(Typed or printed name of person signing)		
PRESIDENT		
(Title of person signing)		