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2022 APR 22 AM 8: 59
SECRETARY OF STATE

A. BUTLER
JUN - 9 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	IATION: GIL'S DESIGN UP	HOLSTERY CORP			
DOCUMENT NUMB	BER: P14000053188				
	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	DARCY CASTILLO				
		Name of Contact Person			
	GIL'S DESIGN UPHOLSTERY CORP				
		Firm/ Company	_		
	1855 NW 21 ST				
		Address			
	MIAMI, FL 33142				
		City/ State and Zip Code	 		
	GILSDESIGNUPHOLSTERY	Y@GMAIL.COM			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
ADRIAN MORLANN	NE	at (360-3004		
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made p	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)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

FILED

2022 APR 22 AM 8:59

GH'S DESIGN LIPHOLSTERY CORP

GIL'S DESIGN UPHOLSTERY CORP			SCOBOTA OU AE AELEE
(Name o	of Corporation as current	ly filed with the Florid	
P14000053188			AVECABLOGIE, FL
	(Document Number of	of Corporation (if known	1)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpora	tion adopts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
			74
name must be distinguishable and contain "Inc.," or Co.," or the designation "C" chartered," "professional association."	Corp," "Inc," or "Co".	A professional corpora	
B. Enter new principal office address,	if applicable:		
(Principal office address <u>MUST BE A S</u>			
			M
C. Enter new mailing address, if appl	icable:		
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	<u></u>	
D. If amending the registered agent ar			he name of the
new registered agent and/or the new	DARCY CASTILLO	<u>s:</u>	
Name of New Registered Agent	DARCT CASTILLO		 -
	1855 NW 21 ST		
	(Florida st	reet address)	
New Registered Office Address:	MIAMI		. Florida ³³¹⁴²
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			eations of the position
		A-/	
)11111 I .	\mathcal{I}
		my -	
	Signature of New 1	(egistefed Agent, if effent	Tging

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)

Example:

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.

X Change	<u>PT</u>	John Doe				
X Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address			
1) Change	PD	ERNESTO GIL	1855 NW 21 ST			
Add			MIAMI, FL 33142			
X Remove			1855 NW 21 ST			
2) Change	PD	DARCY CASTILLO	MIAMI, FL 33142			
X Add						
Remove 3) Change	v	ERNESTO GIL	1855 NW 21 ST MIAMI, FL 33142			
X Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Attach addi	tional sheets,	if necessary).	icles, enter cha (Be specific)				
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lf an amen	dment provid	des for an exc	hanoe reclassi	fication, or cance	ellation of issue	d shares	
provisions	for impleme	enting the ame	endment if not	contained in the	amendment it	self:	
(if not	applicable, u	ndicate N/A)					
				···			
							
 -							
		_					

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	04/21/2022	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	m.c.a.	
Effective date <u>if applicable</u> :	/2022	
meetive date in appreciate.	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	sted by the incorporators, or board of directors with	hout shareholder action and shareholder
☐ The amendment(s) was/were adopty the shareholders was/were sufficiently.	oted by the shareholders. The number of votes car ficient for approval.	st for the amendment(s)
	oved by the shareholders through voting groups. each voting group entitled to vote separately on th	
"The number of votes east f	or the amendment(s) was/were sufficient for appr	oval
by		
	(voting group)	 '
04/21/2022 Dated	Dawy S	
selected	ector, president or the officer of directors or or by an incorporator – if in the hands of a receiver diffiduciary by that fiduciary)	
!	DARCY CASTILLO	
-	(Typed or printed name of person signi	ng)
I	PRESIDENT	
-	(Title of person signing)	, <u>**</u>