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C. CARROTHERS

COVER LETTER

Division of Corporations NAME OF CORPORATION: Specialty Kitchen & Bath Inc. DOCUMENT NUMBER: P14000079482 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mohammad S. Ahmed Name of Contact Person Firm/ Company Address PO Box 783605 City/ State and Zip Code Winter Garden, FL 34778 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sharon S. Brown Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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of	1 ≥ SS -5
Specialty Kitchen & Bath Inc.	
(Name of Corporation as currently filed with the	Florida Dept. of State)
P14000079482	1995 - 19
(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 amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	Mohammad Ahmed
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	200 S 14th Street
	Leesburg, FL 34748
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Mohammad Ahmed
	PO Box 783605
	Winter Garden, FL 34778
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent Sharon S. Brow	vn
26810 Bull Rur	1
	treet address)
New Registered Office Address: Leesburg	, Florida 34748
(City	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar Signature of New Registered	with and accept the obligations of the position.

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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Р	Shireen Ansari	14138 Fox Glove St.
Add			Winter Garden, FL 34787
Remove			
2) Change	Р	Mohammad S. Ahmed	200 S. 14th Street
Add			Leesburg, FL 34787
Remove			
3) Change			
Add			
Remove			
_			
4) Lange Change			
Add			
Remove			
5) Change			
Add		-	
Remove			
6) Change			_
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	cies, enter chan (Be specific)	ge(s) nere:				
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f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassifi adment if not c	cation, or co ontained in	ancellation the amend	of issued sh ment itself:	iares,	
	_ _			<u></u>		

The date of each amendment(s) adoption: date this document was signed.	
·	
Effective date if applicable: (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature	
(By a director, 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	
appointed fiduciary by that fiduciary)	
Mohammad Ahmed	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_