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T. LEMIEUX

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORA	TION: ABSOLUTE	M PERFECT HA	RDWOOD FLOORING INC		
DOCUMENT NUMBE	r:P	14000089352	·		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	atter to the following:			
_	Nuk	Name of Contact Person	n		
_	Q	FL Agency Firm/Company			
_	2002 N	IW 8th PL			
2002 NW 8th PL Address Cape Coted FL 33993 City/ State and Zip Code					
	<u>Cape</u>	Correl FL =	3993		
	·	City/ State and Zip Coo	le		
	940	adros 96@c sed for future annual repor	iol, com		
	E-mail address: (to be us	sed for future annual repor	notification)		
For further information o	oncerning this matter, pleas	se call:			
Nub	ia Quadros	at (727	de & Daytime Telephone Number		
Name of	Contact Person	Area Co	xde & Daytime Telephone Number		
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:		
S \$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)		
Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 assec, FL 32314	Ameno Divisi Cliftor	Address diment Section on of Corporations n Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

ABSOLUTELY PERFECT HARDWOOD FLOORING INC

(Name of Corporation as currently filed with the Florida Dept. of State) P(4000089352 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

Signature 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>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change	P	_	Estefania G. Fernandes	
X Add Remove				Orlando FL 32812
2) <u>X</u> Change Add	VP	_	Schnaider M Mendonca	5961 Colchester Dr Orlando FL 32812
Remove 3) Change Add		_		
Remove 4) Change Add Remove		_		
5) Change Add Remove		_		
6) Change Add Remove				

tach additional sheets, if necessary).	(Be specific)		
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an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cand	nucellation of issued shares, the amendment itself:	
(y not approximation 1111)			

The date of each amendment(s) adoption:date this document was signed.	3 31 2016	, if other than the
•	2/21/2016	
Effective date if applicable: (no	more than 90 days after amend	dment file date)
Note: If the date inserted in this block does not me document's effective date on the Department of State	et the applicable statutory filin	
Adoption of Amendment(s) (CHECK	ONE)	
The amendment(s) was/were adopted by the sharel by the shareholders was/were sufficient for approve		cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharmust be separately provided for each voting group		
"The number of votes cast for the amendmen	nt(s) was/were sufficient for app	proval
by(voting gi		
(voting gr	roup)	
☐ The amendment(s) was/were adopted by the board action was not required.	l of directors without sharehold	ler action and shareholder
☐ The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder ac	ction and shareholder
Dated3 31 20	nia fernanc	
Signature	ania Fernanc	les
(By a director, president	or other officer — if directors o	
selected, by an incorpora appointed fiduciary by the	utor — if in the hands of a receiv nat fiduciary)	er, trustee, or other court
E	STEFANIA FEA	PNIANDEC
(Турс	d or printed name of person sig	gning)
	PRESIDENT	
	(Title of person signing)	