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COVER LETTER

'O: Amendment Sec Division of Corp				• •		
TAME OF CORPO	RATION: AVIN FURNITUR	E CORP				
	BER: P15000000460					
he enclosed Articles	s of Amendment and fee are su	bmitted	or filing.			
lease return all corre	espondence concerning this ma	tter to the	followin	g:		
	YENISLEYDI RODRIGUEZ	:				
	AVIN FURNITURE CORP	Name	of Conta	ct Person		
	1451 NE 169TH ST APT 211		rm/ Com	pany		
	NORTH MIAMI BEACH FL	. 33162	Addres	S		
		City/ S	State and	Zip Code	:	
yeni	odriguez1122@gmail.com	l				
	E-mail address: (to be us	ed for fut	ure annu	al report	notification)	
or further information	on concerning this matter, pleas	se call:				
'ENISLEYDI RODRIGUEZ				5	420-7557	
Name	of Contact Person		- "-	Area Coo	de & Daytime Telephone Number	
nclosed is a check f	or the following amount made	payable to	the Flor	rida Depa	artment of State:	
\$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	Certi	75 Filing fied Copy tional copsed)	y	S52.50 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 Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303	

Articles of Amendment to Articles of Incorporation of

VIN FURNITURE CORP							
(Name o	of Corporation as c	urrently	filed with the Florid:	a Dept. of Sta	<u>te</u>)		
15000000460							
	(Document N	amber of (Corporation (if known	1)			
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statut	es, this Fl	lorida Profit Corpora	tion adopts the	: following	; amen	dment(s) to
. If amending name, enter the new na	ame of the corpora	tion:					
						The	11/114/
ime must be distinguishable and contain lnc.," or Co.," or the designation "Cahartered," "professional association," Enter new principal office address, Principal office address MUST BE A S. Enter new mailing address, if applia (Mailing address)	Corp," "Inc," or " or the abbreviation if applicable: TREET ADDRESS	Co". A j i "P.A."		APT 211	st contain	Corپي ب	rp., "
. If amending the registered agent an			ss in Florida, enter t	he name of th	<u>e</u>		
new registered agent and/or the nev		Ī					
Name of New Registered Agent	YENISLEYDI RO	DRIGUE:	Z 				
	1451 NE 169TH S	APT 21	1				
	(FI	orida stree	t address)				
New Registered Office Address:	NORTH MIAMI E	EACH		, Florida	33162		
			City)		(Zip Co	ode)	_
ew Registered Agent's Signature, if convereby accept the appointment as regist			th and accept the obli	gations of the p	position.		
		M					
-	Signature o	fNew Reg	sistered Agent, if chan	iging			

dress of each Officer a ttach additional sheets, ease note the officer/dire = President; V= Vice F ecutive Officer; CFO = esident, Treasurer, Dire tanges should be noted in thange, Mike Jones leaver, tke Jones, V as Remove,	ind/or D if necess ector title resident Chief Firector wor in the for	virector besary) Ite by the fit; T= Tree inancial Guld be PT illowing morporation	eing added: irst letter of the a isurer; S= Secre Officer. If an offic D. anner. Currentl n, Sally Smith is	ffice title: tary; D= Director; T er/director holds mon y John Doe is listed a	R= Tru re than is the P	irector being removed and title, name, and astee; $C = Chairman \ or \ Clerk; \ CEO = Chief one title, list the first letter of each office held. ST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,$
a mple: _Change	PT	John Do	<u>e</u>			
Remove	V	Mike Jo	nes			
Add	<u>sv</u>	Sally Sn	nith			
rpe of Action heck One)	Title		<u>Name</u>			<u>Addres</u> s
Change	P	_	YOVANI SAN	L CHEZ	_	14264 SW 181 TER
Add						MIAMI, FL 33177
X_Remove						
Change	P	_	YENISLEYDI	RODRIGUEZ	_	1451 NE 169TH ST APT 211
X_{Add}						NORTH MIAMI BEACH
Remove Change		_			_	FL 33162
Add						
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If amending or adding (Attach additional shee			cles, enter chan (Be specific)	ge(s) here:		

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date of each amendment(s) adoption: this document was signed.	Page 3 of 4	, if other than the

ote: If the date inserted in this block does not meet the applic ocument's effective date on the Department of State's records.	table statutory filing requirements, this date will not be listed as the
doption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders by the shareholders was/were sufficient for approval.	e number of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through the separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/we	re sufficient for approval
by(voting group)	."
(voting group)	
The amendment(s) was/were adopted by the board of directors action was not required.	without shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators with action was not required.	nout shareholder action and shareholder
Dated 12/10/19	
Dated 12/10/19 Signature	
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(Typed or printed) NIGUEZ
1	
Presid	ent.
(Title of person signing)	