## P1500005023Y

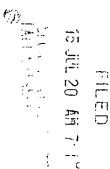
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: woodfloorinstallati	onservic	
<b>DOCUMENT NUMBER:</b> p15000050234			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this mat	tter to the following:	
	calvin jarvis		
		Name of Contact Person	n
	woodfloorinstallationservic		
		Firm/ Company	
	3615 unique cir		
		Address	
	ft myers fla 33908		
City/ State and Zip Code			
wood	floorinstallationservices@gma	ail.com	
	•	ed for future annual report	notification)
	E man address. (to be as	ed for fatare annual report	notification)
For further information	n concerning this matter, pleas	e call:	
calvin jarvis		at (239	910/7521
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Division	Address ment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name o	of Corporation as curren	tly filed with the Florida Dept, of St	ate)
woodfloorinstallationservic			<del></del> .
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the	ne following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
wood floor installation service inc			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corporation n	or the abbreviation
B. Enter new principal office address,	if applicable:	3615 unique cir ft myers fla 3390	8
(Principal office address <u>MUST BE A S</u>			<del></del>
		<del></del>	
<ul> <li>C. Enter new mailing address, if appliance (Mailing address MAY BE A POST of the Mailing address)</li> <li>D. If amending the registered agent and new registered agent and/or the new</li> </ul>	OFFICE BOX) d/or registered office add		ne
Name of New Registered Agent	calvin keith jarvis	<del>-</del>	
Nume of New Registered rigem	3615 unique cir ft myers	fla 33908	
	(Florida st	reet address)	<del></del>
New Registered Office Address:	calvin keith jarvis 3615 u	nique cir ft myers fla 33908	ła
		(City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registed	ered agent. I am familiar	t: with and accept the obligations of the  Accept the obligations of the  Registered Agent, if changing	position. 15 JUL 20 A.H

## 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>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	ceo		calvin keith jarvis	3615 unique cir ft myers fla 33908
x Add				
Remove				
2) Change		<del></del>		
Add				
Remove				
3) Change		<u></u>		
Add				
Remove				
4) Change		<del></del>		
Add				-N-111-
Remove				
5) Change		_		
Add				
Remove				
6) Change				10.00
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
f an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

07/14/2015	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more the	n 90 days after amendment file date)
Note: If the date inserted in this block does not meet the appropriate document's effective date on the Department of State's record	oplicable statutory filing requirements, this date will not be listed as the s.
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	
"The number of votes cast for the amendment(s) was	were sufficient for approval
by calvin keith jarvis	"
(voting group)	·
☐ The amendment(s) was/were adopted by the board of direct action was not required.	tors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder
Dated	I Jano
	officer – if directors or officers have not been if the hands of a receiver, trustee, or other court ary)
cavin keith jarvis	
(Typed or prin	ted name of person signing)
preident/	
(Ti	tle of person signing)