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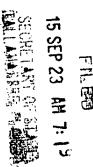
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MENDOZA	CARPET FLOC	DRS INC
DOCUMENT NUME	BER: P1500006320	0	
	of Amendment and fee are sub		
Please return all corres	pondence concerning this mat	ter to the following:	
	ANGEL DIEZ		
		Name of Contact Person	
	DBS DIEZ BUSIN		
•	·	Firm/ Company	
	4125 W WATERS	AVE	
		Address	
	TAMPA, FL 3361		
		City/ State and Zip Code	
DB	S.10@VERIZON.I	NET	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
ANGEL DIEZ	<u>-</u>	_{at (} 813	871-1816
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	ayable to the Florida Depa	rtment 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327	Amend Divisio Clifton	Address ment Section n of Corporations Building
Talla	ahassee, FL 32314		xecutive Center Circle Issee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

MENDOZA CARPET FLO	ORS INC			
(Name of Corporation as cu	rrently filed with the Florida D	ept. of State)		
P15000063200				
(Document N	lumber of Corporation (if known)			
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this <i>Florida I</i>	Profit Corporation adop	ts the following am	endment(s) to
A. If amending name, enter the new name	of the corporation:			
				e new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or "Co". A			
B. Enter new principal office address, if a (Principal office address MUST BE A STR.)		<u> </u>		
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF	ble: FICE BOX)			
D. If amending the registered agent and/o new registered agent and/or the new registered Agent Name of New Registered Agent		lorida, enter the name	of the	
	(Florida street addre	ss)		
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
			,	

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.

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	ones			
X Add	<u>sv</u>	Sally Si	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			Address
1) Change	VP		YASSER	LOPEZ MONTER	0	4125 W WATERS AVE
X		- 				GIBSONTON, FL 33534
Remove						•
2) Change	VP		ARMANDO	GUERRA MENDOZ	'A	2385 NE 173RD ST
Add						NORTH MIAMI BEACH, FL 33160
X Remove						
3) Change		_			<u> </u>	
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_			_	
Add						
Remove						
6) Change		_	***************************************			
Add						
Remove						

rnud	nending or adding a ch <i>additional sheets</i> ,	if necessary).	(Be specific)		
						<u> </u>
•						
						
						
				. .		
					····· · · · · · · · · · · · · · ·	
lf ar pro	n amendment provi ovisions for implem (if not applicable, i	enting the ame	hange, reclassendment if no	ification, or car t contained in th	ncellation of issume to the samendment i	ned shares, tself:
				·		
•	<u> </u>					· -
						<u> </u>
	#/ *					

09/14/2015 The date of each amendment(s) adoption: , if other than the date this document was signed. 09/14/2015 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 (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. 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) YUNIOR MENDOZA (Typed or printed name of person signing) PRESIDENT (Title of person signing)