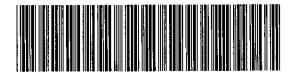
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(Re	equestor's Name)	
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(Cı	ty/State/Zip/Phone	⊖#)
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Special Instructions to	Filing Officer:	
		

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COVER LETTER

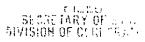
TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: EC' CAPRI FURN	ITURE INC		·
	BER: P150000081045			
The enclosed Article:	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following	<u>;</u> :	
	EDDER DIAZ			
		Name of Contac	t Person	
	EC' CAPRI FURNITURE IN	IC		
		Firm/ Comp	any	
	10720 W FLAGLER ST STI	€ 6		
		Address		
	MIAMI, FL 33174			
		City/ State and Z	Zip Code	
For further information	E-mail address: (to be used) on concerning this matter, pleas		l report i	notification)
EDDER DIAZ		at (899-7005
Name	of Contact Person		Area Cod	e & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Flori	da Depai	rtment of State:
\$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing I Certified Copy (Additional copenclosed)	·	□\$52.50 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			Division Clifton	Address ment Section of Corporations Building secutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation



EC Capri Fi (Name of Corporat	ernitu	CC C	LIC Florido Dont	ZUII JAN -	3 PH 1:06
P15000081045	ion as Chitchily	med with the	rioriua Dept. (or state)	
(Docur	ment Number of C	Corporation (if	known)		
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	la Statutes, this FI	lorida Profit C	Corporation adop	pts the following a	mendment(s) to
A. If amending name, enter the new name of the c	orporation:				
					he new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co abbreviation "P.	o". A profess			
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)					
					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>DX</u>)				
					
D. If amending the registered agent and/or registe		ss in Florida,	enter the name	of the	
new registered agent and/or the new registered	office address:			•	
Name of New Registered Agent					
	(Florida strce	t address)			
New Registered Office Address:			, F	lorida	
	(C	Tity)		(Zip Coa	le)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		th and accept i	he obligations o	of the position.	
•					
Size	nature of New Reg	nistered 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.

X Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	EDUARDO SALGADO-	10720 W FLAGLER ST STE 6
			MIAMI, FL 33174
X Remove			
2) Change	P	EDDER DIAZ	10720 W FLAGLER ST STE 6
<u>x</u>			MIAMI, FL 3374
· Remove			
3) Change			
Add			
Remove			
4) Change			
	•		
Remove			
5) Change			
Add			
Remove			
(Change			•
δ) Change			
Add			
Remove			

f amending or adding additional Attach <i>additional sheets, if necessa</i>	ıry). (Be specific				
		*···			
an amendment provides for an provisions for implementing the (if not applicable, indicate N/.	amendment if no			ares.	
			·		
			······		

The date of each amendment(s) ado	ption:	
date this document was signed.		SECRETARY OF MAN. DIVISION OF CERPORATE :
Effective date if applicable:		
	(no more than 90 days after	amendment file date 2017 JAN - 3 PH 1: 06
Note: If the date inserted in this blo document's effective date on the Department.		ry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of vicient for approval.	votes cast for the amendment(s)
	oved by the shareholders through voting gach voting group entitled to vote separate	
"The number of votes east fo	r the amendment(s) was/were sufficient f	for approval
by		, "
,	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shar	reholder action and shareholder
The amendment(s) was/were adopt action was not required.	ted by the incorporators without sharehol	lder action and shareholder
Dated	2/28/16/	
Signature	Edobal Dog	
selected,	ector, president of wher officer—if direct by an incorporator vif in the hands of a d fiduciary by that fiduciary)	
	EDDER DI	AZ
_	(Typed or printed name of pers	son signing)
	PRESIDEN	JT
_	(Title of person sig	gning)