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SECRUTARY OF STATE TALLAHASSEE FLORIDA

And

DEC 15 2015

R. While

COVER LETTER

Division of Corporations						
NAME OF CORPORATION: PVECISE Flour Covering DOCUMENT NUMBER: 800275455 678						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Name of Contact Person Precise FLOOV Covering Firm/Company 5651 S Chranberry Hud Address North Port FL 34286 City/State and Zip Code 2Vevigov ok & Yahoo. Com E-mail address: (to be used for nature annual report notification)						
For further information concerning this matter, please call:						
Igov Sviduwvill at (94) 6815326 Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee & Certificate of Status Certificate of Status \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)						

Mailing Address

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

15 DEC 11 AH 4: 04

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Florida

(Florida street address)

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)'

 \mathcal{F}

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 Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	<u>PT</u>	Igar Svidunovich	5651 S Chronherry	
Add Remove			5651 S Chronherry BIVd North Port FL 34286	
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis and an analysis and an an
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an angel in the amendment itself:

The date of each amendment(s) adoption: date this document was signed.	12-9-15	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	es not meet the applicable statutory filing requirements, tof State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient f	the shareholders. The number of votes cast for the amend or approval.	ment(s)
	the shareholders through voting groups. The following sting group entitled to vote separately on the amendment(s	
"The number of votes cast for the a	mendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	the board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder	
Signature (By a director, p selected, by an i	resident or other officer – if directors or officers have not no or or officer or other iary by that fiduciary)	
	Typed or printed name of person signing)	
	President	
	(Title of person signing)	