P15000097247

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	· ∋ #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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12/15 or

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: CLOSETS ELEM	ENTS INC	
DOCUMENT NUMBER	R:		
	Amendment and fee are su	ibmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
Y	OURNEY L FUMERO		
		Name of Contact Perso	on
CI	OSETS ELEMENTS INC	-	
		Firm/ Company	•
33	00 PORT ROYALE DR N	I APT 234	
		Address	
F	LAUDERDALE, FL 333	08	
		City/ State and Zip Co	de
	Famail address: (to be us	sed for future annual repor	1 notification)
	is man address. (to be a	sed for factore timinal report	(New Houtens)
For further information co	oncerning this matter, pleas	se call:	•
YOURNEY L FUMERO)	at (305 °	394-0082
Name of 0	Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Dep	partment 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)
Amend Divisio P.O. Be	e Address ment Section n of Corporations ox 6327 ssee, FL 32314	Amen Divisi Clifto	t Address dment Section on of Corporations on Hadding Executive Center Circle

. . . .

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CLOSETS ELEMENTS INC		
(Name of Corporation as	currently filed with the Florida Dept. of Stat	<u>e</u>)
P15000097247		
(Document N	Number of Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the	following amendment(s) t
A. If amending name, enter the new name of the corporation	ration:	
CLOSET ELEMENTS INC.		The new
name must be distinguishable and contain the word "co"Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	nc," or "Co". A professional corporation nar	or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u> .	<u>SS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		FILED PH 1: 59 LUMBASSEE FROM
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		. `
Name of New Registered Agent		
	Florida street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am		osition.
Sunatura	of Nove Parietored 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 <math>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	PT John Doc	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change		/
Add		
Remove		
2) Change		
Add		
Remove		
3)Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

	Articles, enter change(s) here: y). (Be specific)
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	<u>/</u>
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If an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,
- provisions for implementing the a	mendment if not contained in the amendment itself:
Lif not applicable indicate N/1	,
(if not applicable, indicate N/A	

The date of each amendment		if other than the
date this document was signed	12/08/2015	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendme ere sufficient for approval.	ent(s)
	re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	ement
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
12/08 Dated		
Signature	MIF	
(E	By a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other copointed fiduciary by that fiduciary)	
	YOURNEY L FUMERO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	