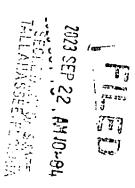
## P16000023100

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| Limils                                  |
| Office Use Only                         |



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## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: SANDY FINISHE   | ED WOOD INC  |  |
|-------------------------|---|--|--|
| DOCUMENT NUM            | BER: P16000023100   |  |  |
|                         | s of Amendment and fee are su   | ibmitted for filing.   |  |
| Please return all corre | espondence concerning this ma   | tter to the following:   |  |
|                         | PEDRO MANUEL CEDEN  | O MARTINEZ   |  |
|                         | SANDY FINISHED WOOD   | Name of Contact Person<br>INC                                      | 1  |
|                         | 6460 PARK STREET  | Firm/ Company  |  |
|                         | HOLLYWOOD FL 33024  | Address  | ···  |
|                         |   | City/ State and Zip Code   | 2  |
|                         | mabelwunschetaxes@gmail.c   | com  Sed for future annual report                                  |  |
| For further information | on concerning this matter, pleas  |  | 561-9509   |
| Name                    | of Contact Person   | Area Co  | 561-9509<br>de & Daytime Telephone Number  |
| Enclosed is a check for | or the following amount made  | payable to the Florida Depa  | artment of State:  |
| S35 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)                 |
| Am<br>Div<br>P.O        | endment Section<br>ision of Corporations<br>I. Box 6327<br>lahassee, FL 32314 | Amend<br>Divisio<br>The Co<br>2415 N                               | Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303 |

## Articles of Amendment Articles of Incorporation of

| C | ٠ | NI | ı١ | ٧, | 171 | I N I | 21 | 11 | CIT | ۱ II. | 11° \1 | 11/ | INC |
|---|---|----|----|----|-----|-------|----|----|-----|-------|--------|-----|-----|
|   |   |    |    |    |     |       |    |    |     |       |        |     |     |

| SANDY FINISHED WOOD INC   |                                    |                 |  |                      |                      |  |
|---|------------------------------------|-----------------|--|----------------------|----------------------|--|
| ( <u>Name</u><br>P16000023100   | of Corporati                       | on as currentl  | y filed with the Florida De  | ept. of State)       |                      |  |
|   | (Docum                             | nent Number o   | f Corporation (if known)   |                      |                      |  |
| Pursuant to the provisions of section 607 its Articles of Incorporation:  | ·                                  |                 | •  | adopts the following | g amendn             | ient(s) to   |
| A. If amending name, enter the new n  | ame of the co                      | orporation:     |  |                      |                      |  |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "Catartered," "professional association,                             | Corp," "Inc,"                      | " or "Co". A    | 1 professional corporation   |                      |                      | ••   |
| B. Enter new principal office address, (Principal office address MUST BE A 5  |                                    |                 |  |                      | <u>~</u>             |  |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST)  D. If amending the registered agent an new registered agent and/or the new | <i>OFFICE BQ</i><br>nd/or register | red office addr |  | ame of the           | 123 SEP 22 AH 10: 04 | O'SEAT O'SEAT O'S A STATE OF THE STATE OF TH |
| Name of New Registered Agent  |                                    |                 | OME TAX SERVICE INC  |                      |                      |  |
|   | 6115 STIRLING RD SUITE 209         |                 |  |                      | •                    |  |
|   |                                    | (Florida stre   | eet address)   |                      | •                    |  |
| New Registered Office Address:  | DAVIE                              |                 |  | . Florida 33314      |                      |  |
|   |                                    |                 | (City)   | (Zip C               | lode)                |  |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist  | tered agent.                       | I am familiar w | eith and accept the obligation in the obligation | ·                    |                      |  |
| Check if applicable  ☐ The amendment(s) is/are being filed p  | oursuant to s. 6                   | 307.0120 (11) ( | e), F.S.   |                      |                      |  |

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)

Example:

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 Doe                 |                    |
|-------------------------------|--------------|--------------------------|--------------------|
| X Remove                      | <u>V</u>     | Mike Jones               |                    |
| X Add                         | <u>sv</u>    | Sally Smith              |                    |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>              | <u>Addres</u> s    |
| 1) Change                     | P            | Aldent R. Hernandez Rosa |                    |
| Add<br>_X Remove              |              |                          |                    |
|                               | P            | Pedro M. Cedeno Martinez | 6460 Park Street   |
| X Add                         |              |                          | Hollywood FL 33024 |
| Remove Change                 |              |                          |                    |
| Add                           |              |                          |                    |
| Remove                        |              |                          |                    |
| 4) Change                     |              | <del>_</del>             |                    |
| Add                           |              |                          |                    |
| Remove                        |              |                          |                    |
| 5) Change                     | -            |                          |                    |
| Add                           |              |                          |                    |
| Remove                        |              |                          |                    |
| 6) Change                     |              |                          |                    |
| Add                           |              |                          |                    |
| Remove                        |              |                          |                    |

| Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific)                 |
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| f an amendment provides for an exch      | hange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A)        | endment if not contained in the amendment itself:          |
| (y nor apparente, marcare 1971)          |  |
|  | <del></del>  |
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| The date of each amendment date this document was signed | (s) adoption:, if other than the   |
|--|--|
| Effective date if applicable:                            |  |
|  | (no more than 90 days after amendment file date)   |
|  | his block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.   |
| Adoption of Amendment(s)                                 | ( <u>CHECK ONE</u> )   |
| The amendment(s) was/wer<br>action was not required.     | e adopted by the incorporators, or board of directors without shareholder action and shareholder   |
| ☐ The amendment(s) was/wer<br>by the shareholders was/we | e adopted by the shareholders. The number of votes east for the amendment(s) are sufficient for approval.  |
|  | e approved by the shareholders through voting groups. The following statement d 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   |
| by   | ·*   |
|  | (voting group)   |
| 09/15/<br>Dated  |  |
| Signature /  | y a director, president or other officer – if directors or officers have not been  |
| se   | y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
|  | Aldent Ramon Hernandez Rosa  |
|  | (Typed or printed name of person signing)  |
|  | President  |
|  | (Title of person signing)  |