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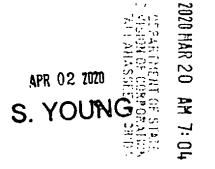
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: L&T Kitchen and Both Inc.		
DOCUMENT NUMBER: P 160000 25267		
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 L&T Kitchen and Both Inc.		
Firm/Company SUBU Philips Hwy Stell		
Jacksonville, FL 3:2256 City/ State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Contact Person at (646), 468,8994 Area Code & Daytime Telephone Number		
Auto Code to Dayline Telephone Plantoes		
Enclosed is a check for the following amount made payable to the Florida Department of State:		
S35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Street Address Amendment Section		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation

of .

1 L&T Kitchen	and Bath	Inc.	
(Name of Corporation as currently	filed with the Florida De	pt. of State)	
x Phono 25	5267		
(Document Number of	Corporation (if known)	,	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Horida Profit Corporation :	adopts the following amendn	nent(s) to
A. If amending name, enter the new name of the corporation:			
		The ne	14'
name must be distinguishable and contain the word "corporation," "co". Inc., " or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:	ompany," or "incorporated professional corporation	" or the abbreviation "Corp.,	••
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address:		1020 HAR 20 AM 7: 04	FILED
Name of New Registered Agent			
(Florida stre	et address)		
New Registered Office Address:	_	_, Florida	
	Chy)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w. Signature of New Registered Signature of New Registered Signature of New Registered Signature Signatu	ith and accept the obligatio		
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (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)

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
l) Change		Meiling Li	8030 Philips Hun Stel
X Add		(50%)	8030 Philips Huy Stell Jacksonville, FL 3225
Remove			
2) Change			
Add			ia.
Remove 3) Change			
Add			
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4) Change		<u> </u>	
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Remove			
6) Change			
Add			
Remove			

additional sheets, if necessary). (Be specific)	
	-
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 .	
	
mendment provides for an exchange, reclassing the amendment if not applicable, indicate N/A)	contained in the amendment itself:
not applicable, indicate N/A)	
	1
	N/A
	(1)
-	
_	

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The date of each amendmendate this document was signe		3/9/2020	, if other than the
Effective date if applicable:			
	(no mor	re than 90 days after amendment f	ile date)
Note: If the date inserted in document's effective date on			firements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ON	<u>NE</u>)	
The amendment(s) was/we action was not required.	ere adopted by the incorpora	ators, or board of directors withou	t shareholder action and shareholder
	ere adopted by the sharehold were sufficient for approval.	ders. The number of votes cast for	the amendment(s)
		olders through voting groups. The attitled to vote separately on the an	
"The number of vote	es east for the amendment(s)) was/were sufficient for approval	
by			
	(voting group	<i>)</i>)	
Dated	3/9/202	20 1	
_) Signature _	- Ou	2X100	
s		ther officer – if directors or office – if in the hands of a receiver, trus iduciary)	
	(Typed or	Printed name of person signing)	
	P	resident	
	(Title of p	person signing)	