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COVER LETTER

TO: Amendment Section Division of Corporations	•
NAME OF CORPORATION: Elege	2051463
DOCUMENT NUMBER:	2001910.5
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
<u>Rafael</u> <u>Eleg</u>	Name of Contact Person Cabinetry Firm/Company
III NIN	135 AUR 10-102
Plantal	Address FL 33305
	City/ State and Zip Code
Closeds bu E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
Profesala Malaria	701 1770.
Name of Contact Person	at (186) Q 37 9 7 0 5 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount in	nade payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee Certificate of State	
Mailing Address	Street Address
Amendment Section	Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment

to

Articles of Incorporation

<u>Elegant</u> abinetry, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
<u> </u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(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 in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent Bafaela Valerio
111 NW 135 AUR 10-102
(Florida street address)
New Registered Office Address: (City), Florida (City)
The second second
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
A Thurstone 18 5
Signal Registered 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)

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 (Check One)	Title	Name	Address !
1) Change	P	Franklin Valerio	III NW 135 AVE
Add			10-102
Remove			Plantation 33325
2) Change	7	Rafaela Valerio	III NW 135 AUR
X Add			10-102
Remove			Mantation 33325
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			,
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or ac Attach <i>additional</i>	Iding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)
EIN	30-0944593
	
f an amondment	provides for an exchange, reclassification, or cancellation of issued shares,
nrovisions for it	nplementing the amendment if not contained in the amendment itself:
(if not applic	cable, indicate N/A)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

The date of each amendment(s) adoption date this document was signed.	otion:	, 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 document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date rtment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement sch 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)	
	(voung group)	
☐ The amendment(s) was/were adopted action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated 7	125/16	
Signature <u> </u>	ruklin A. Vales 10	
selected, l	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)	
_	Franklin Valerio	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	
	;	TAS -1
		S AUG