## P16000077842

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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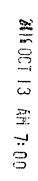


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OCT 1 4 2015

C. CARROTHERS





October 11, 2016

IVAN O HERNANDEZ 1400 N FEDERAL HWY HOLLYWOOD, FL 33020

SUBJECT: MY FLORIDA DECOR INC

Ref. Number: P16000077842

We have received your document for MY FLORIDA DECOR INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

ONLY CHECK ONE BOX ON PAGE 4 OF 4

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 816A00021854

Cathy A Carrothers Regulatory Specialist

www.sunbiz.org

## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: MY FLORIDA DECOR INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: IVAN O HERNANDEZ Name of Contact Person MY FLORIDA DECOR INC Firm/ Company 1400 N FEDERAL HWY Address HOLLYWOOD, FL 33020 City/ State and Zip Code OSWALKING@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: IVAN O HERNANDEZ Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

——————————————————————————————————————	tion as currently filed with the Florida Dept. of State)	
216000077842		•
(Docu	ament Number of Corporation (if known)	· <del>····································</del>
ursuant to the provisions of section 607.1006, Florid s Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following	owing amendment
. If amending name, enter the new name of the	corporation:	
		The new
Corp.," "Inc.," or Co.," or the designation "Corporation "Corporation," or the contraction," or the contraction, " or the contraction of the contr	•	
Enter new principal office address, if applicable office address <u>MUST BE A STREET AD</u>		
,		
		<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	OVI	
(Manning uniters) MAL DE A FOST OFFICE D		
y.		
If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered	ered office address in Florida, enter the name of the doffice address:	- 4
Name of New Registered Agent		
Traile Of New Reguler on Alera		
		<del></del>
<del></del>	(Florida street address)	
New Registered Office Address:	, Florida	(Zip Code)

Signature of New 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)

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	et	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	USA FURNITURE DISTRIBUTOR	15954 NW 48TH AVENUE
Add			MIAMI LAKES, FL 33014
Remove  2) Change	VP	ALL SOLUTION GROUP CORPOR	7981 NW 68TH STREET
Add			MIAMI, FL 33166
X Remove 3)Change	P	IVAN O HERNANDEZ	1400 N FEDERAL HWY
X Add			HOLLYWOOD, FL 33020
4) Change	VP_	FRANCISCO SILVA LEON	1400 N FEDERAL HWY
X Add			HOLLYWOOD, FL 33020
Remove  5) Change  Add	D	Ulmises Suarez	7981 NW 68+4. 5 Mioni FL 33/66.
Remove	•		
6) Change		<del></del>	
Remove		•	

The date of each amendmen date this document was signed		if other than the
	09-27-2016	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
09-27 Dated Signature	-2016	
(B	by a director, president or other officer - if directors or officers have not been elected, by an incorporator - if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	Ivan Hernandez.	
	(Typed or printed name of person signing)	
	PRESIDENT (/.	
	(Title of person signing)	