P16000084014

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
,	,	
(0)	JOhn Cin IDham	- 40
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
,	,	
Cartified Canies	Cortificator	s of Status
Certified Copies	_ Certificates	s or Status
<u>,</u>		
Special Instructions to	Filing Officer:	

Office Use Only



100291024481

10/21/16--01004--023 **35.00

THE COLD PH 4: 35

10/24°N

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CNS FLOORING,	INC
DOCUMENT NUMBER: P16000084014	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
JAMES H COLLIER	
·	Name of Contact Person
COLLIER'S ACCOUNTING	6 & BOOKKEEPING SERVICE, INC.
	Firm/ Company
8812 SHENANDOAH LAN	• •
	Address
HUDSON, FL 34667-2721	
	City/ State and Zip Code
jcolli58@yahoo.com	
	sed for future annual report notification)
(
For further information concerning this matter, pleas	se call:
JAMES H COLLIER	at (⁷²⁷) 868-6020
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	·
\$35 Filing Fee \$\times \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CNS FLOORING, INC.		
(Name of Corpora	ation as currently filed with the Florida	Dept. of State)
P16000084014		
(Docu	ument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Florida Profit Corporati</i>	on adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:	
GNS FLOORING, INC.		The new
name must be distinguishable and contain the wi "Corp.," "Inc.," or Co.," or the designation "Conword "chartered," "professional association," or the	rp," "Inc," or "Co". A professional coi	corporated" or the abbreviation
B. Enter new principal office address, if applicab		
(Principal office address <u>MUST BE A STREET AL</u>	<u>DDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B) D. If amending the registered agent and/or registered new registered agent and/or the new registered Many Registered Agent	tered office address in Florida, enter the	FILED PH : 35
Name of New Registered Agent		4-1 - 104107 - 104407
	(Florida street address)	
New Registered Office Address:		. Florida
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent.		ations of the position.
	anuture of New Registered Agent if chang	nina

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change			·	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

<u>If amending or adding additional Arti</u> Attach <i>additional sheets, if necessary).</i>	(Be specific)
	•
-	
	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y noi applicable, malcale IVA)	
	······································

The date of each amendment(s) ad	option:	_, if other than the
date this document was signed.	9-2016	
Effective date if applicable:	·	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopty the shareholders was/were sufficiently.	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by	(voling group)	
	(voling group)	
☐ The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
10/19/2016		
Dated	left Me William	_
selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	
	(