## Pleaso HUSO

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	me)
(Dc	ocument Number)	,
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TIL'E DI 18 JUL 16 AN 3:58 SECRETARY OF STATE ALLAHASSEE, FLORIDA

JUL 17 2018 S. YOUNG

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: <u>Architectural Des</u>	sign+Luxe Corp		
DOCUMENT NUM	4BER: <u>P16000084680</u>			
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		
Please return all con	respondence concerning this ma	utter to the following:		
	Keith Brady	Name of Contact Person	n	
	Keith Brady Law	Firm/ Company		
	360 Central Ave, Suite 800	) Address		
	St. Petersburg, FL 33701	City/ State and Zip Cod	e	
	Keith@KeithBradyLaw E-mail address: (to be u	.com sed for future annual report	notification)	
For further informat	ion concerning this matter, plea		,	
	ı Brady	at ( <u>727</u>		
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building		

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	y filed with the Florida Dept. of Sta	te)
16000084680		
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation "Corp" "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation ".	'Co". A professional corporation na	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		FILE SECREVANO ALLAMASSEE
D. If amending the registered agent and/or registered office address:		MI 3: 58 STATE LURIDA
Name of New Registered Agent Kimberly Marie Courie		
10149 Pink Palmata C (Florida stre	Court Riverview, FL 33578 neet address)	
New Registered Office Address: 10149 Pink Palmata Co	ourt Riverview, Florida 33578 (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent.  I hereby accept the appointment as registered agent. I am familiar with		osition.
1// 1 1 20	egistered 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.

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 Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1)Change		_		
Add				
Remove				
2)Change				
Add		_		
Remove				·
				•
3 )Change		<del>_</del>		
Remove				
4)Change				
Add				
Remove				
5)Change		_		
Add				
Remove				
6)Change				
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)			
		· · ·		
				<del></del>
			<del></del>	
	-	-		
f an amendment provides for an exc	hange, reclassifica	tion, or cancellation	on of issued shares	<b>1</b>
provisions for implementing the am (if not applicable, indicate N/A)	endment if not co	ntained in the ame	noment usen:	
,				
				<del></del>
	<del></del> .			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 7 /11 /18	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
Lembery Marie Carie	