P160000095140

(R	equestor's Name)			
(A	ddress)			
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(C	ity/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Name)			
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

ING INC.	
bmitted for filing.	
ter to the following:	
ODRIGUEZ	
Name of Contact Person	n
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Viem/Company	
Pittir Company	
Address	
City/ State and Zip Cod	e
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	I report notification
to the area for taxage arrival	report normalion,
е сап:	
at (1
Area Co	de & Daytime Telephone Number
payable to the Florida Depa	urtment of State:
□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assec, FL 32301
	pomitted for filing. ter to the following: ODRIGUEZ Name of Contact Person Firm/ Company Address City/ State and Zip Cod to be used for future annual c call: at (Area Co ayable to the Florida Depa Certified Copy (Additional copy is enclosed) Street Amend Division Clifton 2661 E

Articles of Amendment Articles of Incorporation

e e	to Articles of Incorpora	tio n		Mark of the state
	of		42	60 /
KASTAR FLOORING INC.				
(Name of Corporation as currently	filed with the Florida	Dept. of State)		
P16000095140			Ć.	
(Document Number	of Corporation (if knowr	1)		
Pursuant to the provisions of section 607.1006, Flor Incorporation:	rida Statutes, this <i>corpor</i>	ation adopts the following	ng amendment(s) to	its Articles of
A. If amending name, enter the new name of the	corporation:			
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or the	rp," "Inc," or "Co". z		ated" or the abbres	
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET AL				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>			
D. If amending the registered agent and/or registered agent and/or the new registered		Florida, enter the name	of the	
Name of New Registered Agent				
	(Florida street add	dress)		
New Registered Office Address:	(2)	, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	egistered Agent: . I am familiar with and	accept the obligations o	of the position.	
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 <math>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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Elmer Augusto Rodriguez Arauz	12517 Tinsley Cir. # 303
Add			Tampa Fl 33612
Remove			
2) Change			_
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	 		
Add Remove			

	(Be specific)
	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

	, if other than the
date this document was signed.	
Effective date if applicable: 12 10 2016 (no more than 90 days after amendment file date)	-
(no more than 90 days after amendment file date)	
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 east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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.	
12/06/2016	
Dated	
Signature (B) 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)	
RISOBERTO MU ARAUE ROURIS (Typed or printed name of person signing)	've Z
D	
(Title of person signing)	-

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