Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of ail pages of the document.

(((H190002049163)))



To:		<u> </u>
	Division of Corporations	1 CD
	Fax Number : (850)617-6380	. &
	• •	*
From:		
	Account Name : ITAX GROUP, LLC	, œ
	Account Number : 120140000115	-i v
	Phone : (813)882-8426	rri oo
	Fax Number : (813)884-0263	

Email Address: NODSON DIAS (a) HOT MAIL, COM

S TALLENT

-JUL 0.9 2019

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July 5, 2019

FLORIDA DEPARTMENT OF STATE

EXCEPTIONAL FLOORING INSTALLATION INC. 4733 W WATERS AVE 437

TAMPA, FL 33614US

SUBJECT: EXCEPTIONAL FLOORING INSTALLATION INC

REF: P17000000156

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Susan Tallent Regulatory Specialist II

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L FLOORING INSTALLATION INC
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natter to the following:
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Address
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used for future annual report notification)
ase call:
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e payable to the Florida Department of State:
☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is cnclosed) Certified Copy (Additional Copy is enclosed)
Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Amendment

Articles of Incorporation	1	
of		
EXCEPTIONAL FLOORING INSTALLATION INC	Į	
(Name of Corporation as currently filed with the Florida Dept. of State)	i	
P17000000156		
(Document Number of Corporation (if known)	 -	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	i wing amen	idment(s) to
A. B amending name, enter the new name of the corporation:	<u> </u> 	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name moved "chartered," "professional association," or the abbreviation "P.A."	The abbrevia	- • •
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>	 2
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	1:	
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:		တ္ မော တ
Name of New Registered Agent		
(Flurida street address)		
New Registered Office Address:		
(City) (Zi	r Code)	
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		
v		
Signature of New Registered Agent, if changing		

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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:

(Attoch 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	PT	John Doc	i i
X Remove	ñ	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type <u>of Actio</u> n (Check One)	Title	Name	Address
1) Change	VP	Ricardo Manuel Silva Fernandes	8810 Citrus Village Dr Apt 104
X Add			Tampa, FL 33626
Remove			
2) Change		<u> </u>	
Add			
Remove			
3) Change		··	
Add			
Remove			
4) Change		- · · · · · · · · · · · · · · · · · · ·	
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i an amenome	int provides to:	r an exchange,	reclassificatio	<u>n, or cancellatio</u>	n of issued share	es,	
DEOAISIONS TO	<u>implementing</u>	the amendmen	<u>nt if not contai</u>	ned in the amer	dment itself:		1
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07/03/2019 The date of each amendment(s) adoption:	if other than the
Effective date <u>if applicable</u> :	, F d
(no more than 90 days after umendment file date)	1 4
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	will not 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):	10 C C C C C C C C C C C C C C C C C C C
"The number of votes cast for the amendment(s) was/were sufficient for approval	1
by	
(voting group)	
The amendment(s) was/were adopted by the hoard 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.	
July 03rd, 2019 Dated	
Signature (Byja 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)	
JOSE J DIAS ALMEIDA	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

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