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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: 2K KARPET, INC.	·		
	1BER: P17000010275		<u> </u>	
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this mat	tter to the following:		
	FOZIA ANDARGE			
		Name of Contact Persor	1	
	FM FINANCIAL SERVICES	S, INC.		
		Firm/ Company		
	1510 E. COLONIAL DR. ST	E. 210		
		Address		
	ORLANDO, FL 32803			
		City/ State and Zip Code	2	
FOZ	ZIA@FMFINANCIAL.COM			
	-	sed for future annual report	notification)	
For further informati	ion concerning this matter, pleas	se call:		
KEZIAH CARIB		407 at (, 222-0768	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made p	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
Amendment Section		Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327 Tallabassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2K KARPET, INC.		1917 DEC 10 D 3: 1h
(Name	of Corporation as currently	v filed with the Florida Dept. of State)
P17000010275		Start Barrier
· · ·	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this a	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
		The new
	nation "Corp," "Inc," or "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent ar	OFFICE BOX) nd/or registered office addr	
new registered agent and/or the ne		
Name of New Registered Agent	KHALIL ROYAL	
	7225 WOODRIDGE PAR	K DR #308
	(Florida str	ect address)
New Registered Office Address:	ORLANDO	Florida
-		(City) (Zip Code)
New Registered Agent's Signature, if c		i. with and accept the obligations of the position.
47.7	Signature of New R	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 Doc 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	KEZIAH CARIB	2702 KRIS CROSSING		
Add	-		OCOEE, FL 34761		
X Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if	necessary). (Be sp	er change(s) here ecific)			
		,			
					
- 		.			
					· - ·
·		-			
				<u>-</u>	
· · · · · · · · · · · · · · · · · · ·	-, <u>-</u> -				
f an amendment provides	s for an exchange, re	eclassification, or	cancellation of iss	ued shares,	
provisions for implement	ing the amendment	if not contained	in the amendment	itself:	
(if not applicable, ind	icate N/A)				
				 _	
	- <u></u>				
_ _				_	
			=		 .

The date of each amendment(s) adoption:, if other late this document was signed.	r than
Effective date if applicable: (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 be list document's effective date on the Department of State's records.	ied as
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	
(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)	
KHALI Ł ROYAL	
(Typed or printed name of person signing)	-
PRESIDENT	_
(Title of person signing)	-

the

the