# P1700049713

(Requestor's Name)	_
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



800305446808

800305446808 11/14/17--01001--006 \*\*35.00

FILING CANCELLED RETURNED CHECK

RECEIVED OF STATE

NOV 1 3 2017 T. LEMIEUX



#### **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: SOUTHERN FLOORS AND NOTE INC.  DOCUMENT NUMBER: P17000049713
•
The enclosed Articles of Amendment and fee are submitted for filing.  FILING CANCELLED
Please return all correspondence concerning this matter to the following:
Michael R. Craft  RETURNED CHECK
Name of Contact Person
66 Roosevelt Address
Beverly Hills Fha. 34465  City State and Zip Code
Southern floors and more of mail con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael R. Craft at 352 875-3360
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional Copy is enclosed)  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

# FILING CANCELLED RETURNED CHECK

to Articles of Incorporation

Youthern +Loo	rs And More INC.
	as currently filed with the Florida Dept. of State
	049 <u>7/3</u>
(Documen	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abo	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRI	<u>283</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<del>4-1-1</del>
	<del></del>
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
New Registerea Office Address:	(City) , Florida (Zip Code)
	·
New Registered Agent's Signature, if changing Regist	ered Agent:
I hereby accept the appointment as registered agent. I a	um familiar with and accept the obligations of the position.
	•
Signate	ure of New Registered Agent, if changing
<del>-</del>	

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> <u>John D</u>	<u>oe</u>		
X Remove	<u>V</u> <u>Mike J</u>	ones		
X Add	<u>SV</u> <u>Sally S</u>	mith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
l) Change	<u> </u>	Angelique H Wei	tekamp	<del>77-</del>
_X_ Add			66 Rooseve	<u>//-</u>
Remove	FILING (	CANCELLED NED CHECK	Beoerly, Hills	F/4344
2) Change		NED CHECK		
Add				<del></del>
Remove				
3 ) Change				
Add				<u>.</u>
Remove				
4) Change				
Add				<del></del>
Remove				
5) 01				
5) Change				
Add				
Remove				
6) Change				
Add				
^ Remove				

# FILING CANCELLED RETURNED CHECK

RETURNED CHEC
- Marie Marie Control of the Control
cellation of issued shares, e amendment itself:
MANUAL CONTRACTOR OF THE CONTR

## FILING CANCELLED RETURNED CHECK

the date of each amendment(s) adoption:, if other than t date this document was signed.
Effective date if applicable: 107/2016 of 13, 2017
(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 listed as t document's effective date on the Department of State's records.
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
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)
Owner Director
(Title of norman signing)