## P18000008797

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A. Butter

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: TRIPLE K FLOOF	RING INC	
	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	IVON GALLO		
		Name of Contact Persor	1
	NOVI FINANCIAL INC		
		Firm/ Company	····
	3800 INVERRARY BLVD	SUITE 101-A	
		Address	
	LAUDERHILL, FL 33319		
		City/ State and Zip Code	2
	NOVIFINANCIAL@GMAII	L.COM	
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, pleas		
IVON GALLO 		at (	_)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FUED

RIPLE K FLOORING INC	2021 110 10 000
(Name of Corporatio	on as currently filed with the Florida Dept. of State) 19 Pri [2: 5]
18000008797	SECRITARY OF SYATE
(Docume	ient Number of Corporation (if known)
rsuant to the provisions of section 607.1006, Florida Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(
If amending name, enter the new name of the con	rporation:
	The new
me must be distinguishable and contain the word "con nc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P,A"
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADD</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>X</u> )
If amending the registered agent and/or register new registered agent and/or the new registered.	red office address in Florida, enter the name of the office address:
	<del></del>
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Reg thereby accept the appointment as registered agent.	ustered Agent: I am familiar with and accept the obligations of the position.
,	
Signe	ature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doe	
X Remove	$\underline{V}$	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	JESENIA FERREIRA	1677 NW 91ST AVE
Add			CORAL SPRINGS, FL 33071
X Remove			
2) Change		_	
Add			
Remove 3) Change		<del>-</del> -	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

utach additional	Iding additional Artic sheets, if necessary).	(Be specific)			
				<del> </del>	
				·	
					<del>-</del> -
<u>fan amendmen</u>	provides for an excha	ange, reclassificati	ion, or cancellat	ion of issued share	<u>28,</u>
provisions for is	nplementing the amen able, indicate N/A)	dment if not cont	ained in the ame	endment itself:	
(у посаруна	unie, maicale 1974)				
		<del></del>			
				·	
	· · · · · · · · · · · · · · · · · · ·				

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: 6/10/2021	
(no more than 90 days after amendment file date)	·
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	harcholder
■ 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 Waver Sufficient for approval  (voting group)	
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)	
PRESIDENT	
(Title of person signing)	