# P18000009211

| (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: |
|   |
|   |
|   |
| 4135,-only/box                          |
| Office Use Only                         |



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09/28/20--01019--002 \*\*35.00

R. 1775 TE NOV 3 . 2020

# COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO  | DRATION: AARON'S FLOOR                       | RING, CORP  |   |  |  |
|--|--|---|---|--|--|
|  | 1BER: P18000009211                           |   |   |  |  |
| The enclosed Article   | es of Amendment and fee are su               | bmitted for filing.   |   |  |  |
| Please return all corr                                       | espondence concerning this ma                | tter to the following:  |   |  |  |
|  | Jose Leon                                    |   |   |  |  |
|  | Name of Contact Person                       |   |   |  |  |
|  | LBS Leon Business Services LLC               |   |   |  |  |
|  |  | Firm/ Company   |   |  |  |
|  | 8333 w McNab Rd Ste 115                      | Title Company   |   |  |  |
|  | Address                                      |   |   |  |  |
|  | Tamarac FL 33321                             |   |   |  |  |
|  | City' State and Zip Code                     |   |   |  |  |
|  | fls.office@leonbusineservices.com            |   |   |  |  |
|  | E-mail address: (to be us                    | sed for future annual repor   | t notification)   |  |  |
|  |  |   |   |  |  |
| For further informati  | on concerning this matter, plea              | se call:  |   |  |  |
| Jose Leon  |  | at (347   | ) 813-6744<br>ode & Daytime Telephone Number  |  |  |
| Name   | of Contact Person                            | Area Co   | ode & Daytime Telephone Number  |  |  |
| Enclosed is a check  | for the following amount made                | payable to the Florida Dep  | partment of State:  |  |  |
| S35 Filing Fee   | ☐ \$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | ☐ \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |  |  |
| Mailing Address  Amendment Section  Division of Corporations |  | Street Address Amendment Section Division of Corporations                   |   |  |  |
| P.O. Box 6327  |  | The Centre of Tallahassee   |   |  |  |
| Tallahassee, FL 32314  |  | 2415 N. Monroe Street, Suite 810  |   |  |  |

Tallahassee, FL 32303



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 4, 2020

JOSE LEON 8333 W MCNAB RD STE 115 TAMARAC, FL 33321

SUBJECT: AARON'S FLOORING, CORP

Ref. Number: P18000009211

We have received your document for AARON'S FLOORING, CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

\*\*PLEASE ONLY CHECK ONE BOX\*\*

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 720A00022124

www.sunbiz.org

#### Articles of Amendment . TO . Articles of Incorporation of

to

| urrently filed with the Florida Dept. of State)   |
|---|
|   |
|   |
| mber of Corporation (if known)  |
| es, this Florida Profit Corporation adopts the following amendment(s  |
| ion:  |
| The new   |
| ion," "company," or "incorporated" or the abbreviation "Corp.," "o". A professional corporation name must contain the word "P.A." |
| }   |
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|   |
| ce address in Florida, enter the name of the iddress:   |
|   |
|   |
| orida street address)   |
|   |
| , Florida   |
|   |

### Check if applicable

 $\square$  The amendment(s) is are being filed pursuant to s. 607.0120 (11) (e), F.S.

I 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change                   | <u>PT</u>            | John Doe                     |                           |
|----------------------------|----------------------|------------------------------|---------------------------|
| X Remove                   | $\underline{\nabla}$ | Mike Jones                   |                           |
| X Add                      | <u>sv</u>            | Sally Smith                  |                           |
| Type of Action (Check One) | Title                | <u>Name</u>                  | <u>Addres</u> s           |
| 1) Change                  | AP                   | Jairo Vicente Vasquez Flores | 4337 SW 48 COURT          |
| X Add                      |                      |                              | FORT LAUDERDALE, FL 33314 |
| Remove                     |                      |                              |                           |
| 2) Change                  |                      |                              |                           |
| Add                        |                      |                              |                           |
| Remove Change              |                      |                              |                           |
| Add                        |                      |                              |                           |
| Remove                     |                      |                              |                           |
| 4)Change                   |                      |                              |                           |
| Add                        |                      |                              |                           |
| Remove                     |                      |                              |                           |
| 5 Change                   |                      |                              |                           |
| Add                        |                      |                              |                           |
| Remove                     |                      |                              |                           |
| 6) Change                  | · <del></del>        |                              |                           |
| Add                        |                      |                              | ,                         |
| Remove                     |                      |                              |                           |

| E. If amending or adding additional Artic (Atta-h) additional sheets, if necessary). |   |                 |
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| V 16   |   | Second - Konson |
| F. If an amendment provides for an exch<br>provisions for implementing the amer      | ange, reclassification, or cancellation of indirect if not contained in the amendme |                 |
| (if not applicable, indicate N/A)  |   |                 |
|  |   |                 |
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|  | loption:  | , if other than the                 |
|--|---|-------------------------------------|
| into this document was signed.   |   | , ,                                 |
| Effective date <u>if applicable</u> :                                    |   |                                     |
|  | (no more than 90 days after amendment file date)  |                                     |
| Note: If the date inserted in this bedocument's effective date on the De | lock does not meet the applicable statutory filing requirements, partment of State's records.   | this date will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )  |                                     |
| The amendment(s) was/were add action was not required.                   | pted by the incorporators, or board of directors without sharehold  | ler action and shareholder          |
| The amendment(s) was/were add<br>by the shareholders was/were su         | pted by the shareholders. The number of votes east for the amen fficient for approval.  | dment(s)                            |
|  | proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendments:  |                                     |
| "The number of votes cast  | for the amendment(s) was/were sufficient for approval   |                                     |
| by   |   |                                     |
|  | (voting group)  |                                     |
| Signature<br>(By a di<br>selected  | rector, president or other officer – if directors or officers have no l. by an incorporator – if in the hands of a receiver, trustee, or other diduciary by that fiduciary) |                                     |
|  | (Typed or printed name of person signing)   |                                     |
|  | (Typed by printed name of person signing)  (Typed by printed name of person signing)  |                                     |
|  | (Fitle of person signing)   |                                     |