## P18000014888

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nar	me)
(Do	ocument Number)	<u>.</u>
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MAJESTIC FURN	NITURE CORP			
DOCUMENT NUM	P18000014888				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
		Name of Contact Person	1		
	ALICIA PAGARD				
		Firm/ Company			
•	MAJESTIC FURNITURE CORP				
	<del>= · · · · · · · · · · · · · · · · · · ·</del>	Address			
	3221 SABAL PALM MANO	OR APT 102, HOLLYWOO	DD FL 33024		
		City/ State and Zip Code	2		
ALIC	CIAJOYEAUX10@GMAIL.C	ЮМ			
	~	sed for future annual report	notification)		
		•			
For further information	n concerning this matter, pleas	se catl:			
ALICIA PAGARD		at (	352-5564		
Name (	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		ment Section n of Corporations Building xecutive Center Circle		

## Articles of Amendment to Articles of Incorporation of

FILED

with the Florida Dept. of State)  Action (if known)  Profit Corporation adopts the following amendment(s)  The new mpany." or "incorporated" or the abbreviation professional corporation name must contain the  SABAL PALM MANOR APT 102
Profit Corporation adopts the following amendment(s)
Profit Corporation adopts the following amendment(s)
The new npany." or "incorporated" or the abbreviation professional corporation name must contain the
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SARAL DALM MANOR APT 102
SABALTALM MANOR AT 1 102
LYWOOD, FL 33024
,
orida, enter the name of the
rs)
. Florida
(Zip Code)

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove		•	
2) Change			
Add			
Remove			
3) Change	~		
Add			
Remove			
4) Change			
Add Remove			
Kemove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pamaya			

	icles, enter change(s) here:  (Be specific)
f an amendment provides for an eval	ange, reclassification, or cancellation of issued shares.
	MICE. PECIANNICATION, OF CARECHARDOLOU INNOCUNITALES.
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
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provisions for implementing the amer	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendn	vent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date 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 case by the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups.  must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro	ovaj
by	. <b></b> .
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	on and shareholder
Signature  (By a director, president or other officer – if directors or o selected, by an incorporator – if in the hands of a receiver.	
appointed fiduciary by that fiduciary)	
ALICIA PAGARD	
(Typed or printed name of person signi	ng)
PRESIDENT	

(Title of person signing)