P180000 38063

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N:		
	18000038063		
The enclosed Articles of Ame	ndment and fee are su	bmitted for filing.	
Please return all corresponder	ace concerning this ma	tter to the following:	
Jasmi	na Lekovska		
	 	Name of Contact Persor	1
JL & A	R CORP		
		Firm/ Company	
15678	Shorebird Ln		
		Address	, , , , , , , , , , , , , , , , , , ,
Winter	Garden , FL, 34787	•	
		City/ State and Zip Code	
iasmina@m	assiano.com		
<u> </u>		sed for future annual report	notification)
For further information conce	rning this matter, plea	se call:	
Jasmina Lekovska		407 at (530-1770
Name of Cont	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	artment of State:
	\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

2020 (11113 P<u>il Lino</u> JL & AR CORP (Name of Corporation as currently filed with the Florida Dept. of State P18000038063 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: MASSIANO FURNITURE INC _The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 9655 South Orange Blossom Trail Suite B B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Orlando , FL, 32837 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>Y</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			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•	cles, enter change(s) here: (Be specific)
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

•

•

	, if other than the
The date of each amendment(s) a date this document was signed.	doption:, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the D	plock does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	t for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) is/are being	filed pursuant to s. 607.0120 (11) (e), F.S.
☐ The amendment(s) was/were accation was not required.	lopted by the incorporators, or board of directors without shareholder action and shareholder
1/6/2020	
Dated	Aubuy
select	director, president of other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Jasmina Lekovska
	(Typed or printed name of person signing)
	VP
	(Title of person signing)