P18000057358

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: M & D FLOORS	INC		
DOCUMENT NUMB	ER: P18000057358	11	<u></u>	
	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	condence concerning this ma	tter to the following:		
	HUMBERTO GONZALEZ			
-		Name of Contact Persor	1	
	RAPID INCOME TAX COF	۲)،		
-				
		Firm/ Company		
_	11300 NW 87 CT #150			
		Address		
	HIALEAH GARDENS, FL.	33018		
-		City/ State and Zip Cod	<u> </u>	
LLCT	AX@YAHOO.COM			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
HUMBERTO GONZALEZ		at (2908649	
Name of Contact Person		Area Code & Daytime Telephone Number		
		21 - 4 - 62 - 23 - 48		
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:	
S35 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)	
Mailing Address		Street Address		
Amei	ndment Section	Ameno	lment Section	
	ion of Corporations	Division of Corporations		
	Box 6327 hassee, FL 32314		Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
P18000057358			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the fe	ollowing amendment	(S) ti
A. If amending name, enter the new name of the corporation:			
MIAMI FLOORS INC		The new	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name	the abbreviation	
B. Enter new principal office address, if applicable:	12295 SW 151 STREET UNIT 205		
(Principal office address MUST BE A STREET ADDRESS)			
	MIAMUFL 33186	AUG	"
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12295 SW 151 STREET UNIT 205	HAS	TARREST CONTRACTOR
· · · · · · · · · · · · · · · · · · ·	MIAMI FL 33186	N 10: ₽	
		71 -	خوري ا
		<u> </u>	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre			
Nam. of New Registered Agent			
· (Florida s	street address)		
New Registered Office Address:	, Florida		
	(City)	(Zip Code)	
New Registered Office Address:	, FI	orida	
Registered Age it's Signature, if changing Registered Ager		otat	
I hereby accept the a _l po intment as r egistered agent. I am familia	r wun ana ассері іне обидановх ој те ро.	mnon.	
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)

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>8V</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			
AdJ		_	
Remove			
5) Change			
Add			
Remove			<u></u>
6) Change			
Add			
Remove			

	or adding additiona mal sheets, if necess	(Be spe	vific)			
						
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<u>f an amendn</u>	nent provides for a	n exchange, rec	classification, of	cancellation of	issued shares,	
	or unplementing the opticable, indicate A	<u>e amendment i</u> CA)	n noi contained	tu tue amenume	iit iiseii.	
provisions for	mictione, materiale					
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	8/2/2019	
The date of each amendment(s) :	doption:	, if other than the
date this document was signed.		
	/2019	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this da epartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(sufficient for approval.	•)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were action was not required.	opted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder	
8/2/2019 Dated		
Signature	Melen M. Coliges	
select	director, president or other officer—If directors or officers have not been ed, by an incorporator—if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	ι
	MELVA M RODRIGUEZ	
	(Typed or printed name of person signing)	
	P.D	
	(Title of person signing)	