P19000013696

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	A & R FLOORING	G DESIGNS INC	·					
DOCUMENT NUME	P10000013606							
The enclosed Articles	of Amendment and fee are su	bmitted for filing.						
Please return all corres	pondence concerning this ma	tter to the following:						
	DANIEL DESTRO							
	Name of Contact Person							
	A & R FLOORING DESIGNS INC							
		Firm/ Company						
	3303 MONROE MEADOWS DR							
		Address						
	ODESSA FL 33556							
		City/ State and Zip Cod	2					
	DAN.DESTRO@GMAIL.C	ОМ						
	E-mail address: (to be us	sed for future annual report	notification)					
For further information	concerning this matter, pleas	se call:						
DANIEL DESTRO		at (407						
Name o	f Contact Person	Area Co	de & Daytime Telephone Number					
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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.	ing Address indment Section sion of Corporations Box 6327 thassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810						

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

	Α	Ŗ,	R	FΤ	Ω	٦R	ING	DESIGNS	INC
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(Name	of Corporation as curren	tly filed with the Florida Dept. of State)		
P19000013696				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the follow	ving amendm	ent(s) to
A. If amending name, enter the new n	name of the corporation:			
			The nev	4'
name must be distinguishable and contai "Inc.," or Co.," or the designation "("chartered," "professional association,	Corp." "Inc." or "Co".	"company," or "incorporated" or the abbrevio A professional corporation name must con "	ution "Corp., tain the word	 d
B. Enter new principal office address,	if applicable:	3303 MONROE MEADOWS DR		
(Principal office address <u>MUST BE A S</u>	STREET ADDRESS)	ODESSA FL 33556		
			20	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	licable: OFFICE BOX)	3303 MONROE MEADOWS DR	20/18 HOV	. 1
		ODESSA FL 33556	8	
			AH 10: 34	• •
D 14				.*
 If amending the registered agent ar new registered agent and/or the new 	<u>id/or registered office ado</u> w registered office addres	fress in Florida, enter the name of the	. <u> </u>	
Name of New Registered Agent	DANIEL DESTRO			
	3303 MONROE MEADOWS DR			
	(Florida si	reet address)		
New Registered Office Address:	ODESSA Florida 33556			
			p Code)	
New Registered Agent's Signature, if e hereby accept the appointment as revist	hanging Registered Agent ered agent. I am familiar	<u>t:</u> with and accept the obligations of the position		
Jamil	L Just	/ yw		
/	Signature of New R	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)

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>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	ROSA R ROSPIGLIOSI RENGIFO	9718 OAKS ST
Add X			TAMPA, FL 33635
? Remove 2) Change	VP	ARQUIMEDES A GUSMAO	9718 OAKS ST
Add			TAMPA, FL 33635
X Remove	S	Carlos Dario Hernandez Arteaga	6511 SPANISH MOSS CIR
Add			TAMPA, FL 33625-6513
X Remove 4) Change X	<u>P</u>	DANIEL DESTRO	3303 MONROE MEADOWS DR
Add Add			ODESSA FL 33556
Remove 5) Change Add			
Remove			
6)Change			
Add			
Remove			

	necessary).	les, enter chang (Be specific)			
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lf an amendment provides t	en an				
ir an anknument provides	ng the amend	ment if not con	tained in the am	<u>ion of issued sha</u> endment itself:	res,
<u>provisions for implementing</u>	3.51.45				
cif not applicable, indica	ate N/A)				
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provisions for implementing	ate N/A)				
(if not applicable, indicable)	ate N/A)				
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	11/11/2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	2112000	
Effective date <u>if applicable</u> :	/11/2020	
	(no more than 90 days aft	ter amendment file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable stati Separtment of State's records.	utory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were acaction was not required.	opted by the incorporators, or board of c	firectors without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number ufficient for approval.	of votes east for the amendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting each voting group entitled to vote separate	ng groups. The following statement rately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient	ent for approval
by		
	(voting group)	
11/11/202	า	
Dated	,	
Signature &	Cotton Cotton	
(By a U selecte	irector, president or other officer – if dir d, by an incorporator – if in the hands of ted fiduciary by that fiduciary)	ectors or officers have not been a receiver, trustee, or other court
	ROSA R ROSPIGLIOSI RENGIFO	
	(Typed or printed name of pe	erson signing)
	PRESIDENT	
	(Title of person signing)	