P19000024085

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	DRATION: IDEAL GARAGE	FLOORS INC				
DOCUMENT NUM	IBER: P19000024085					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	RAYMOND NUMEN					
	Name of Contact Person					
	Firm/ Company					
4409 TARKINGTON DRIVE						
Address						
LAND O LAKES, FL 34639						
City/ State and Zip Code						
	IDEAL GARAGEACUTG OGMAIL. COM					
		sed for future annual report				
For further informati	on concerning this matter, plea-	se call:		2823 JUL 26 SEURZIM TALI/19		
RAYMOND NUMEN		at (477-2245	26		
Name	e of Contact Person	at (813) 477-2245 Area Code & Daytime Telephone Number		· , ~		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	H SO PE		
■ \$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)	ATE E		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to **Articles of Incorporation** of

IDEAL GARAGE FLOORS INC		
(Name of Corporation as currently filed with the Florida Dept. of State)		
P19000024085		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation:	llowing amen	ndment(s) to
A. If amending name, enter the new name of the corporation: NIA		
	The	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbi "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	eviation "Co. contain the v	rp.," word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		_
	<u> </u>	?3 <u> </u>
D. Iftime the registered egent and/on registered office address in Florida, enter the name of the	- []	1171 jul 26
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:		ů. Š
		<u> 19</u> .
Name of New Registered Agent		당 :
(Florida street address)	 플ś	50
(Fibrida street daaress)	u.j	
New Registered Office Address:, Florida	(Zip Code)	
(Cny)	(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 possible statement. Signature of New Registered Agent, if changing	sition.	
Signature ty trew registered rigent, y enunging		
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)

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	KRISTEN A NUMEN	4409 TARKINGTON DRIVE
Add			LAND O LAKES, FL 34639
X Remove			
2) Change	vs	CHRISTOPHER L RISDON	4319 CARROLLWOOD VILLAGI
X Add			TAMPA, FL 33617
Remove			4409 TARKINGTON DR
3) \overline{X} Change	PT	RAYMOND W NUMEN	LAND O LAKES, FL 34639
Add			
Remove			ラ
4) Change			
Add			
Remove			
5) Change			一
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) adoption date this document was signed.	on:		, if other than the
Effective date if applicable:		ays after amendment file date)	
	(no more than 90 d	ays after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Department		e statutory filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted laction was not required.	by the incorporators, or boa	rd of directors without sharehold	der action and shareholder
■ The amendment(s) was/were adopted l by the shareholders was/were sufficient	•	umber of votes cast for the amen	dment(s)
☐ The amendment(s) was/were approved must be separately provided for each			
"The number of votes cast for the	e amendment(s) was/were s	sufficient for approval	
by			
,	(voting group)		
07/21/2023			
Dated	111		
Signature			
(By a director selected, by a		if directors or officers have no ands of a receiver, trustee, or oth	
RAY	MOND W NUMEN		
	(Typed or printed nar	ne of person signing)	
PRES	SIDENT		202 34
	(Title of person signi	ng)	10 E