P19000037453

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SECRETARY OF STATE TALLAHASSEE FI

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ROBERTO'S FLO	ORS INC		
DOCUMENT NUME	BER: P19000037453			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Romulo Montero			
		Name of Contact Persor	<u> </u>	
	Rm Tax & Accounting Service	ces LLC		
		Firm/ Company		
	P O Box 830503			
	<u> </u>	Address		
	Ocala, FL 34483			U
		City/ State and Zip Code	:	TA EC
	rmontero@rmtaxservices.com	n		OKETAKO OF
	E-mail address: (to be us	sed for future annual report	notification)	HA:
For further informatio	n concerning this matter, pleas	se call:		OF ST
Thais Lima Ferrarezi		at (³⁵²	304-7885	
Name o	of Contact Person	Агеа Со	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fec	■\$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)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address ment Section in of Corporations entre of Tallahassee V. Monroe Street, Suite 810	

Tallahassee, FL 32303

2023 MAR 23 PM 2: 0

Articles of Amendment to Articles of Incorporation of

(Name o	f Corporation as currently filed with th	<u>e Florida Dept. of State</u>)	
ROBERTO'S FLOORS INC			
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit	Corporation adopts the following a	imendment(s) i
A. If amending name, enter the new na	me of the corporation:		
		7	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	the word "corporation," "company," or 'orp," "Inc," or "Co". A professional or the abbreviation "P.A."	'incorporated" or the abbreviation corporation name must contain	"Corp.," the word
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			SECRETARY DE STATI
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida registered office address:	enter the name of the	PH 2: 0:
Name of New Registered Agent	THAIS LIMA FERRAREZI		<u>m</u> 9
	15742 SE 96th CT		
	(Florida street address)		
New Registered Office Address:	Summerfield	, Florida	
	(City)	(Zip Coo	de)
New Registered Agent's Signature, if c I hereby accept the appointment as regis Check if applicable	nanging Registered Agent ered agent. I am familiar with and accep MN JUMN JUMN Signature of New Registered Agen	1	
Cucca ii appiicavic			

☐ 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: 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	Name	Address
1) Change	P	JOSE ROBERTO FERRAREZI	3935 CR 216 Ste B
,	-		OXFORD, FL 34483
X Remove			
2) X Change	P	THAIS LIMA FERRAREZI	15742 SE 96TH CT
Add			SUMMERFIELD, FL 34491
Remove 3) X Change	VP	RAFAEL VALERIO	SUMMERFIELD, FL 34491 SECRETARY SUMMERFIELD, FL 34491 AR 23
Add			23 / ASS
Remove			PH 2
4) Change			PH 2: 09 SEE, FL
Add			<u> </u>
Remove			
5) Change			·
Add			
Remove			
6) Change			
Add			
Remove			

		SECR	2023 HAR
		### 55 ###\$\$\$ 	23 PF
		S)ATE	2: 09
If an amendment provides for an provisions for implementing the (if not applicable, indicate N/.	exchange, reclassification, or cancellation of issued sha amendment if not contained in the amendment itself: 4)	res,	

The date of each amendment(s)	adoption:	, if other	r than th	ie
date this document was signed.				
01/ Effective date if <u>applicable</u> :	/01/2023			
Effective date it applicable.	(no more than 90 days after amendment file date)		_	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date we Department of State's records.	rill not be lis	ted as th	ıe
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder action a	nd shareholde	er	
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.			
☐ The amendment(s) was/were approvided for must be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):			
"The number of votes cas	st for the amendment(s) was/were sufficient for approval			
by	,··		_	
,	(voting group)	SE	202	
Dated	3/10/23	CRETARY OF STAT FALLAHASSEE, FL	2023 MAR 23	
Signature	Mas Juna flerally	<u></u> 쭒으	PΗ	} i
(Ву а	director, president or other officer – A directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court	m رے	$\dot{\omega}$	1
	nted fiduciary by that fiduciary)	ΞĬ	. 09	
црро	THAIS LIMA FERRAREZI	. E	9	
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)		_	