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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: LB FLOORING OF	F FLORIDA INC	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	IRAN M HERNANDEZ CL	AVIJO	
,		Name of Contact Person	1
	IB FLOORING OF FLORID	A INC	
		Firm/ Company	
	4000 24TH ST N LOT 408		
	· · · · · · · · · · · · · · · · · · ·	Address	
	SAINT PETERSBURG, FL	33714	
		City/ State and Zip Cod	e
hrends	n.novales@yahoo.com		
	<del>-</del> ·	sed for future annual report	notification)
	n concerning this matter, pleas		308-8980
IRAN M HERNANDEZ CLAVIJO		at ( <sup>727</sup>	
	of Contact Person r the following amount made p		de & Daytime Telephone Number
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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301	

## Articles of Amendment to Articles of Incorporation of

1 B FLOORING OF FLORIDA INC

(Name of Corporation as currently	filed with the Florida Dept. o	f State)
P19000059652		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	<i>lorida Profit Corporation</i> adop	ts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	lo". A professional corporatio	ted" or the abbreviation
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)		
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:		of the
Name of New Registered Agent		
(Florida stre	et audress)	
New Registered Office Address:	, F	lorida (Zip Code)
,	(iii)	
New Registered Agent's Signature, if changing Registered Agent:		12 Als 11
I hereby accept the appointment as registered agent. I am familiar w	un and accept the obugations o	The positions of the position of the positions of the position of the positions of the position of the positions of the position of the positions of the positions of the positions of the positi
Signature of New Re	egistered Agent, if changing	

 If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 offic 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 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	<u>Name</u>	<u>Addres</u> s
1) Change	VP	SEBASTIAN SOCA HERNANDEZ	2909 W WOODLAWN AVE
A Add			TAMPA, FL 33607
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			<del></del>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	<u>f amending or :</u> Attach <i>additiona</i>	idding additional Art I sheets, if necessary).	<u>icles, enter change</u> (Be specific)	(s) here:		
provisions for implementing the amendment if not contained in the amendment itself:		, 2, ,, ,,, ,,	( <b></b>			
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(if not applicable, indicate N/A)	<u>l an amendmei</u> provisions for	nplementing the app	nange, reclassificat	<u>lion, or cancellatio</u> tained in the amon	n of issued shares, dmont itself:	1
	(if not appl	cable, indicate N/A)	nament ii not con	taniça in the amen	different reservi-	
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The date of each amendment(s) a date this document was signed.	doption:	, if other than th
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 deepartment of State's records.	ate will not be listed as th
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(ufficient for approval.	s)
	proved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and sharehold	er
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
08/14/20 Dated	19	
Signature	the car	
(By a 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)	
	IRAN M HERNANDEZ CLAVIJO	
	(Typed or printed name of person signing)	<u>.</u>
	PRESIDENT	
	(Title of person signing)	