P190000 67534

(Requ	uestor's Name)	
(Addı	ress)	
(AbbA)	ess)	
(City/	State/Zip/Phono	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doci	ument Number)	
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C. GOLDEN
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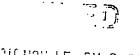
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CIMA FLOORING	G SERVICE, INC	<u></u>	
DOCUMENT NUM	P19000067534			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	SANDRA CIMADEVILLA			
		Name of Contact Person	1	
	CIMA FLOORING SERVICE	E INC		
		Firm/ Company		
	14485 SW 297TH TERRAC			
		Address		
	HOMESTEAD, FL 33033	, www.		
		City/ State and Zip Cod	e	
For further informati	E-mail address: (to be us on concerning this matter, pleas	sed for future annual report	notification)	
SANDRA CIMADE	EVILLA	at (784	<u>, 308-1026</u>	
Name of Contact Person Area Code & Daytime Telephone Nun		de & Daytime Telephone Number		
Enclosed is a check t	or 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)	
M	ailing Address	Street	Address	
Ār	nendment Section	Ameno	Amendment Section	
Division of Corporations		Division of Corporations		
P.O. Box 6327			Building Executive Center Circle	
t a	llahassee, FL 32314	2001 n	ACCULIVE COMET CHOIC	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



CIMA FLOORING SERVICE INC

2015 POT 15 P計 3: 27

(Name of Corporation as current	tly filed with the Florida Dept. of State)
P19000067534	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NON APPLICABLE	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	NO CHANGE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	NO CHANGE
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NO CHANGE
	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent NO CHANGE	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	клау) (глр слове)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position
Signature of Nove	Registered Agent, if changing
Signature of New	regarded rigorit, y 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 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	VP	RAMON MEDINA	14485 SW 297TH TERRACE
X Add			HOMESTEAD FL 33033
Remove			
2) Change			
Add			
Remove			
3) Change		_	_
Add			
Remove			
4) Change			
Add			47114
Remove			<u></u>
5) Change			_
Add			
Remove			
6) Change			
		-	
Add Remove			
KCHIOVC			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	
	
	-
F. If an amandment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/4) 10 % OF THE STOCKS - RAMON MED	NN:a
10 % OF THE STOCKS - KAMON MEL	лим
	· · · · · · · · · · · · · · · · · · ·
	

The date of each amendmen date this document was signed	t(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	NOVEMBER 4, 2019	
енестус пасе <u>и арупсатис</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dathe Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(rere sufficient for approval.	s)
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	પ્ <i>રા</i> ત
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
11/4/ Dated	19	
Dated		
Signature		
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	
	SANDRA CIMADEVILLA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	14 and 14 and 15