## P19000086322

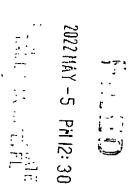
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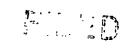
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MANY FLOORIN	G CONSTRUCTION COR	<u> </u>	
DOCUMENT NUMI	P19000086322			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Paulo Mota Martins			
		Name of Contact Person	1	
		Firm/ Company		
		Address		
	465 Kanuha dr	0.10.17.0.1		
		City/ State and Zip Code	2	
	Fort Walton Beach, FL 3254			
	E-mail address: (to be us	sed for future annual report	nonneation)	
For further informatio	n concerning this matter, pleas	se call:		
Paulo Mota Martins		at ( <u>*50</u>	775-8535	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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 to Articles of Incorporation of



MANY FLOORING CONSTRUCTION CORP

2022 HAY -5 PH 12: 30

(Name of Corporati	ion as currently filed with the Florida Dept. of State)	
P19000086322		L Nasi F. FIF
(Docun	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Floridatts Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following	llowing amendment(s) t
A. If amending name, enter the new name of the co	orporation:	
N/A		Ti .
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbr " or "Co". A professional corporation name must e eviation "P.A."	The new eviation "Corp.," contain the word
B. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD		
		<del></del>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
If amending the registered agent and/or register     new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:	
M. Charles Davidson of Language		
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida	
New Neglastia Office States.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	vistered Agent:	
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the pos	ition.
Signe	ature of New 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)

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 Dog	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
I) Change	D	MADILYNN HURLEY	465 Kanuha Dr
X Add			Fort Walton Beach,FL
Remove			32548
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)				
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					<del>, -</del> •
41421					
		<del></del>			
		· · · · · · · · · · · · · · · · · · ·			··
		·			
			<u></u>		
f an amendment provides for an exch provisions for implementing the ame	ange, reclassifice ndment if not co	ation, or cancell intained in the a	<u>ation of issued</u> mendment itse	<u>shares,</u> lf:	
(if not applicable, indicate N/A)					
(y nor apparame, marcaic (vis)					
Ay not appreame, materic (VA)	·····				
ду пот аррисате, такан (ум)		******			
ду погаррисате, такан (ум)					
ду погаррисате, такан (ум)					
ду пог аррисате, такан (угл)					
ду пот аррисате, таксае (угл)					
ду пін аррисате, шасанс (угл)					

	May/02/2022
The date of each amendment(s) ac	
date this document was signed.	22/2022
Effective date <u>if applicable</u> :	02/2022
	(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed a artment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were ado action was not required.	sted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	sted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes east	or the amendment(s) was/were sufficient for approval
by	
	(voting group)
Dated	
Signature	
selected	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	DIEGO MANICOBA DE ARAUJO
-	(Typed or printed name of person signing)
	resident
-	(Title of person signing)