P20000089336

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Furniture & Teak I	Restoration, Inc				
DOCUMENT NUM	1BER: P20000089336					
	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Tainmy McDonald					
	Name of Contact Person					
	Furniture & Teak Restoration, Inc					
	·	Firm/ Company				
	1722 Sheridan St # 202					
		Address				
	Hollywood, Florida 33020					
		City/ State and Zip Code	e			
	furnitureteakrestoration@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informat	ion concerning this matter, plea	se call:				
Tammy McDonald		954-299-83	61			
Nam	e of Contact Person		de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
S35 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)			
Ai Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 illahassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

Furniture & Teak Restoration, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P20000089336 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Limitless Furniture & Teak Restoration, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida (City) (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 position. Signature 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	PT John Do	<u>oe</u>	
X Remove	<u>V</u> Mike Jo	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove 3) Change			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Change			
Add			
Remove			
Change			
_			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
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If an amendment provides for an eych	hange, reclassification, or cancellation of issued shares,
provisions for implementing the	endment if not contained in the amendment itself:
provisions for implementing the ame	
(if not applicable, indicate N/A)	

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	01/06/2021	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
_		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this l document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	i)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by 2	••	
*/	(voting group)	
01/06/202 Dated	1	
	language Dell	
selecte	firector, 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 court need fiduciary by that fiduciary)	
	Tammy McDonald	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	· · · · · · ·