P21000004932

(Reques	stor's Name)
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Certified Copies	Certificates of Status
Special Instructions to Filin	g Officer.
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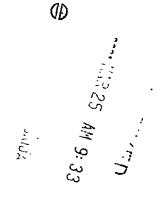
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COVER LETTER -

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: UNIVERSAL GRA	ANITE & CABINETRY IN	EC	
DOCUMENT NUMBI	ER: P21000004932			
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	itter to the following:		
	ROBERTO	C GOMEZ		
		Name of Contact Person	1	
	UNIVERSA	L GRANITE & CABINET	RY INC	
_		Firm/ Company		
	4572 COMM	IERCIAL WAY		
_		Address		
	SPRING HILL FL 34606			
_		City/ State and Zip Cod	e	
	regomez2689	9@gmail.com		
_	-	sed for future annual report	notification)	
For further information ROBERTO C GOMEZ	concerning this matter, plea		623-6773	
	Contact Person	at (727) 623-6773 de & Daytime Telephone Number	
	the following amount made			
■ \$35 Filing Fee	☐\$43.75 Filing Fec & 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)	
Amer Divisi P.O. 1	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation
of 2021 MAR 25
AM

UNIVERSAL GRANITE & CABINETRY INC	AM 9:50
(Name of Corporation as curren	itly filed with the Florida Dept. of State)
P21000004932	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts 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," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered." "professional association," or the abbreviation "P.A	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	4572 COMMERCIAL WAY SPRING HILL
(Principal office address MUST BE A STREET ADDRESS)	FL 34606
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4572 COMMERCIAL WAY SPRING HILL
	FL 34606
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	street address)
4572 COMMERCIAL W	/AY SPRING HILL 34606
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familian	
Simatona of Mon	Registered Agent, if changing
Signature of New	кедыегеа луст, у спануту

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	25 HAS 25
X Add	<u>SV</u>	Sally Smith	25
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address 3.
1) X Change	VP	ADOLFO RIVERA GONZALEZ	4572 COMMERCIAL WAY
Add			SPRING HILL FL 34606
Remove			···
2) X Change	P	ROBERTO C GOMEZ	4572 COMMERCIAL WAY
Add			SPRING HILL FL 34606
Remove 3) Change			
Add			·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
I ALSO NEED TO ADD THE EMPLOYER IDENTIFDICATION NUMBER WHICH IS 86-2373592.
THE NAME FOR THE VICE PRESIDENT NEEDS TO BE CHANGED TO THE CORRECT LEGAL NAME WHICH IS
ADRIAN RIVERA GONZALEZ.
- HR 25

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F. If 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)
(y ma appareume, marcure 1971)

	03/23/2021		
The date of each amendment(s)			, if other than t
late this document was signed.			
03	3/23/2021		
Effective date <u>if applicable</u> :	 	• •	
	(no more than 90	dazza pfier amendment file date) 1 Alt 9.50	
		25 AM 9:59	
Note: If the date inserted in this locument's effective date on the		able statutory filing requirements, this dat	te will not be listed as
are different solutions and the	separation of state a records.	the state of the s	
Adoption of Amendment(s)	(CHECK ONE)	i idκ	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or b	poard of directors without shareholder actio	on and shareholder
☐ The amendment(s) was/were a by the shareholders was/were		e number of votes east for the amendment(s	3)
must be separately provided j		ough voting groups. The following stateme, vote separately on the amendment(s): re sufficient for approval	'nt
by		,"	
. +	(voting group)		
Dated			
•	Also		
Signature	/ ALL		
(By a	director, president or other offic	er - if directors or officers have not been	
selec	eted, by an incorporator - if in the	e hands of a receiver, trustee, or other court	t
арро	pinted fiduciary by that fiduciary)	I	
	ROBERTO C GOMEZ		
	(Typed or printed r	name of person signing)	<u> </u>
	PRESIDENT		
	(Title of person sig	ning)	