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Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : TAX ZONE INC. Account Number : I20190000044 Phone : (407)888-3131 Fax Number : (888)453-0509

**Enter the email address for this business entity to be used for future .
annual report mailings. Enter only one email address please.**

Email Address: accountant@taxzoneFC con

COR AMND/RESTATE/CORRECT OR O/D RESIGN MANUEL'S QUALITY FLOORING INC

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COVER LETTER

TO: Amendment Section of Corp					
NAME OF CORPO	RATION: MANUEL'S QUAL	ITY FLOORING INC			
	DOCUMENT NUMBER: P21000008440				
	of Amendment and fee are sub				
Please return all corre	spondence concerning this mat	ter to the following:			
	ED KOLER				
	,,,,,,,,,,	Name of Contact Person			
	TAX ZONE INC				
		Firm/ Company			
	8865 COMMODITY CIR SU				
		Address			
	ORLANDO, FL 32819				
		City/ State and Zip Code	:		
	ACCOUNTANT@TAXZON	EFL.COM			
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For further information	on concerning this matter, pleas	se call:			
ED KOTLER		ui (⁴⁰⁷) 888-3131 de & Daytime Telephone Number		
Name	of Contact Person	Area Coo	ie & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status		
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 dahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee S. Monroe Street, Suite 810 assee, FL 32303		

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Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P21000008440 (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: The new 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)
(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: The new 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:
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: The new 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:
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B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
(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
(Fiorida street address)
Now Registered Office Address:
New Registered Office Address: , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
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)

Remove

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President: T = Treusurer; 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>	<u>John D</u>	<u>oe</u>			
X Remove	<u>Y</u>	Mike Jones				
_X Add	SV Sally Smith					
Type of Action	<u>Title</u>		<u>Name</u>	Address		
(Check Onc) 1) X Change	P		MANUEL JAIMES ALBITER	113 SOUTH ATLAS DR		
				APOPKA, FL 32703		
Add Remove						
2) Change Add						
Remove 3) Change						
		_				
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4) Change		-				
Add						
Remove						
5) Change		_				
Add Remove						
6) Change						
Add						
/Aud						

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If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
A.	
	
•	
	tanian an concellation of issued shares
If an amendment provides for an excl	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
(if not applicable, indicate N/A)	indifficity in the continuous and the continuous an
() mi diproduce, conserve ,	

Page: 8 of 8

	04/06/2021	, if other than the
The date of each amendment(s) addet this document was signed.	nption:	, if other than the
04/06	/2021	
Effective date if applicable:	(no more than 90 days after	amendment file date)
Note: If the date inserted in this blodocument's effective date on the Dep	nck does not meet the applicable statute partment of State's records.	ry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of dire	ectors without shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of ficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were appropriate the separately provided for e	oved by the shareholders through voting each woling group entitled to vote separa	groups. The following statement tely on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient	for approval
by		,n
·,	(voting group)	
04/06/2021		
Dated		
Signature 7 /		
(By a directed	extor, president or other officer – if direct, by an incorporator – if in the hands of a diductary by that fiduciary)	stors or officers have not been receiver, trustee, or other court
;	MANUEL JAIMES ALBITER	_
-	(Typed or printed name of per	son signing)
	PRESIDENT	
•	(l'itle of person signing)	