P21000047107

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	JORDAN PRO	FLOORING INC			
DOCUMENT NUMBER:	P2100004710)7			
The enclosed Articles of Amendmen.	t and fee are submitted	for filing.			
Please return all correspondence con	cerning this matter to th	e following:			
	NATA	ALY G JORDAN ZA	APEDA		
	Name	e of Contact Person			
JORDAN PRO FLOORING INC					
Firm/ Company					
613 RIVER BAY DR					
Address					
TAMPA, FL 33619					
 -	City/	State and Zip Code			
	JORDANP	ROFLOORING@Y	AHOO.COM		
E-mail ac	ldress: (to be used for fi	uture annual report n	otification)		
For further information concerning the NATALY G JORDAN ZEPEDA	nis matter, please call:	813	317-3610		
Name of Contact Pers	son —	at (Area Code	e & Daytime Telephone Number		
Enclosed is a check for the following			•		
_	eate of Status Cer (Add	3.75 Filing Fee & stified Copy ditional copy is losed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32	rations	Division The Cer 2415 N	address nent Section of Corporations ntre of Tallahassee . Monroe Street, Suite 810 esce, FL 32303		

Articles of Amendment to Articles of Incorporation of

JORDAN PRO FLOORING INC

(Name of Corporation as currentl	ly filed with the Florida Dept. of State)
P21000047107	1
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	=1 22
	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	me - m
	2 3 0
D. If amending the registered agent and/or registered office addi	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>s:</u>
Name of New Registered Agent	
	
(Florida str	reet address)
·	
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Signature of New R	Registered Agent, if changing
Signature of the K	and the state of t
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.

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X Change	<u>PŦ</u>	John Doc	
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	BALTASAR E JORDAN SALINA	AS 613 RIVER BAY DR
X Add			TAMPA, FL 33619
Remove			
2) Change	<u></u>		
Add			
Remove 3) Change			
Add			N 24 NASSE
Remove			િ (2, 2, 2, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
4) Change			FLORIE T
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding addition (Attach additional sheets, if nece	ssary). (Be specific)			
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. If an amendment provides for	an exchange, reclassing	ation, or cancellation intoined in the amend	ment itself:	
provisions for implementing (if not applicable, indicate	N/A)	meanieu in the amena	me <u>nt useu,</u>	
(y nor uppromon, nareme	,			
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• • •	06/18/2022			
The date of each amendment(s) ado date this document was signed.	ption:	·		_, if other than the
Effective date if applicable:				
	(no more than 9	0 days after amendment file	date)	
Note: If the date inserted in this blod document's effective date on the Department.	ck does not meet the application of State's records.	cable statutory filing require	ements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopt action was not required.	ted by the incorporators, or	board of directors without sl	hareholder action and	shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff		e number of votes cast for th	ne amendment(s)	ι,
☐ The amendment(s) was/were appromust be separately provided for ea	oved by the shareholders thr ach voting group entitled to	rough voting groups. The for vote separately on the amen	llowing statement adment(s):	
"The number of votes cast fo	or the amendment(s) was/we	ere sufficient for approval	2022 TĂĹĬ	
by	(voting group)	·	2022 JUN 24	<u> </u>
Dated ()(0 - 1)	8-27 10111	<u> </u>	24 AMII: SSEE, FLER	
selected,	ector, president or other offi by an incorporator – if in the I fiduciary by that fiduciary	cer – if directors or officers he hands of a receiver, truster	have not been	
	NATALY G J	ORDAN ZEPEDA		
_	(Typed or printed	name of person signing)		
	PRESIDENT			
_	(Title of person si	gning)		