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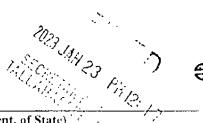


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: VENANCIA FLOO	ORING CORP	
DOCUMENT NUM	BER: P22000088790		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	VENANCIA IXCOY VICEN	те	
		Name of Contact Persor	1
	VENANCIA FLOORING CO)RP	
		Firm/ Company	
	10800 ORANGE RIVER BL	V	
		Address	
	FORT MYERS FL 33905		
		City/ State and Zip Code	e
	IXCOYVICENTE51@GMA	IL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
JESSIE ESPEJO		at (239	810-0757
Name	of Contact Person	Arca Co	de & Daytime Telephone Number
Imelosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	uiling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Division The C 2415 P	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



VENANCIA FLOORING CORP

(Name	of Corporation as currer	ntly filed with the Florida Dept. of State)		
P22000088790				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s) t		
A. If amending name, enter the new n	ame of the corporation:			
N/A		The new		
	Corp, " "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:		N/A		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		N/A		
		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N A		
		N/A		
		N/A		
D. If amending the registered agent an new registered agent and/or the ne		ldress in Florida, enter the name of the		
Name of New Registered Agent	N/A	<u>58:</u>		
	N/A			
	(Florida	street address)		
New Registered Office Address:	N/A	, Florida		
		(City) (Zip Code)		
New Registered Agent's Signature, if of the land the land of the l		•		
	Signature of New	Registered Agent, if changing		

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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>P.I.</u>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	DIR	GILBERTO ADKINS	10800 ORANGE RIVER BLVD
Add			FORT MYERS FL 33905
X Remove			
2) Change	DIR	ADRIANA N HOUX IXCOY	10800 ORANGE RIVER BLVD
X Add			FORT MYERS FL 33905
Remove 3.) Change			
Add			
Remove			
4) Change		_	· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or ad (Attach <i>additional s</i>	<u>aing additional Art</u> heets, if necessary).	ticles, enter change(s) (Be specific)	<u>nere</u> :		
VA	, j,				
					
					
		<u> </u>			
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· · · · · · · · · · · · · · · · · · ·					
···		•			
. If an amendment	<u>provides for an exc</u>	hange, reclassificatio	n, or cancellation	of issued shares.	
provisions for im	plementing the am	endment if not contai	ned in the amend	ment itself:	
	ible, indicate N/A)				
N/A					
	· ·				
			_ .		
····					
				·	

The date of each amendment(s) adoption:, if other than the date this document was signed.
N/A
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
Signature X (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that tiduciary) VENANCIA IXCOY VICENTE
(Typed or printed name of person signing)
Plesident

(Title of person signing)