Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000123726 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BUSINESS ACCOUNTING PROFESSIONALS CORP

Account Number : I20190000020 : (786)953-7449 Pax Number : (786)953-7450

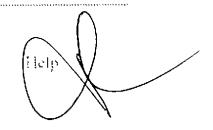
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Email | Address:_ | -144 -1141 |
|-------|-----------|------------|
|-------|-----------|------------|

COR AMND/RESTATE/CORRECT OR O/D RESIGN ALFONSO FLOORING CORP

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$35.00 |

Electronic Filing Monu — Corporate Filing Menu



TO: Amendment Section

COVER LETTER

| Division of Corpor | ations | | | |
|--|---|--|---|--|
| NAME OF CORPORA | ALFONSO FLOO | RING CORP | | |
| DOCUMENT NUMBE | | | | |
| The enclosed Articles of | Amendment and fee are su | bmitted for filing. | | |
| Please return all corresp | ondence concerning this ma | tter to the following: | | |
| R | AUDEL MARTINEZ ALFO | ONSO | | |
| | · | Name of Contact Person | n | |
| A | LFONSO FLOORING COI | RP | | |
| | Firm/ Company | | | |
| 2 | 0205 SW 122 AVE.APT 20- | 4 | | |
| _ | | Address | | |
| <u>N</u> | IJAMI, FL 33177 | | | |
| | | City/ State and Zip Cod | e | |
| В | USINESSACCTPROF@GI | MAIL.COM | | |
| _ | E-mail address: (to be us | ed for future annual report | notification) | |
| For further information of | concerning this matter, pleas | se call: | | |
| RAUDEL MARTINEZ | ALFONSO | at (⁷⁸⁶ | 390-0757 de & Daytime Telephone Number | |
| Name of | Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for t | he following amount made | payable to the Florida Dep | 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) | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Ameno Divisio The C 2415 i | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303 | |

angg (... _3 _ (... [n] n8

Articles of Amendment to Articles of Incorporation of

| ALFONSO FLOORING CORP | |
|---|--|
| | filed with the Florida Dept. of State) |
| P23000017993 | 0 2 00 |
| (Document Number of C | Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation: | lorida 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," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word |
| | ~) |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | |
| (2 m.c.p.a. o), net manifest in the control of the | · · · · · · · · · · · · · · · · · · · |
| | ا |
| | • |
| C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | <u>:</u> |
| (Mauing address MAT BE A POST OFFICE BOA) | |
| | |
| | |
| D. If amending the registered agent and/or registered office addre | ss in Florida, enter the name of the |
| new registered agent and/or the new registered office address: | |
| Name of New Registered Agent | |
| | |
| (Florida stree | et address) |
| New Registered Office Address: | . Florida |
| | City) (Zip Code) |
| | |
| | |
| New Registered Agent's Signature, if changing Registered Agent: | tale and a secretar additional attenuations |
| I hereby accept the appointment as registered agent. I am familiar wi | an and accept the obligations of the position. |
| | |
| | |
| Signature of New Reg | gistered Agent, if changing |
| Charle if annicable | |
| Check If applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c | e), F.S. |

p.5

Example:

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 | PI. | John Doc | |
|-------------------------------|-----------|--------------|--------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| I) Change | VP | VIVIAN GOMEZ | 20205 SW 122 AVE.APT 204 |
| X Add | | | MIAMI, FL 33177 |
| Remove | | | |
| 2)Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | <u> </u> |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | - | | |
| Add | | | |
| Remove | | | |
| o) Change | | | |
| Add | | | |
| Remove | | | |

| | if necessary). (Be | specific) | g. | | |
|---|---------------------|----------------------|------------------------|---------------|-----|
| | | <u> </u> | | | |
| | | | | | |
| | | | | | |
| <u> </u> | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | - |
| | | | | | |
| | | • | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | · | | |
| | | | | <u> </u> | |
| | | | | | |
| | | | | - | |
| | | | | | |
| | les for an exchange | reclassification, or | cancellation of issued | shares. | |
| f an amendment provid | nting the amendme | ent if not contained | in the amendment itse | elf: | |
| provisions for impleme | | | | | |
| f an amendment provio provisions for impleme (if not applicable, in | idicate N/A) | | | | |
| provisions for impleme | ndicate N/A) | | | | |
| provisions for impleme | ndicale N/A) | | | | • • |
| provisions for impleme | ndicate N/A) | | | | |
| provisions for impleme | ndicale N/A) | | | | |
| provisions for impleme | ndicate N/A) | | | | |
| f an amendment provide provisions for impleme (if not applicable, in | ndicale N/A) | | | | |
| provisions for impleme | ndicale N/A) | | | | |
| provisions for impleme | ndicale N/A) | | | | |

p.7

| The data of a | MARCH 31, 2023 each amendment(s) adoption: | , if other than the |
|---------------------------|--|--------------------------|
| | ment was signed. | , ir diller inan in |
| | MARCH 31, 2023 | |
| Effective dat | e if applicable: (no more than 90 days after amendment file date) | |
| | (no more than 90 days after amenament fitte date) | |
| Note: If the document's e | date inserted in this block does not meet the applicable statutory filling requirements, this date vifective date on the Department of State's records. | vill not be fisted as th |
| Adoption of | Amendment(s) (CHECK ONE) | |
| | dment(s) was/were adopted by the incorporators, or board of directors without shareholder action a not required. | nd shareholder |
| The amend by the sha | iment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) reholders was/were sufficient for approval. | 22 |
| ☐ The amend | iment(s) was/were approved by the shareholders through voting groups. The following statement | |
| | eparately provided for each voting group entitled to vote separately on the amendment(s): | ا (ر: |
| "The | number of votes cast for the amendment(s) was/were sufficient for approval | |
| | | <u>.</u> |
| by _ | (voting group) | 3U % 1. |
| | (10 | n8 |
| | MARCH 31, 2023 Dated | |
| | SignatureBooks | |
| | (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 fiduciary) | |
| | RAUDEL MARTINEZ ALFONSO | |
| | (Typed or printed name of person signing) | <u> </u> |
| | PRESIDENT | |
| | (Title of person signing) | |