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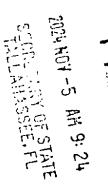
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COVER LETTER

TO: Amendment Section Division of Corporations

t

NAME OF CORPOR	ATION: RAFAEL 'S FLOO	ORING INC					
DOCUMENT NUMBER: P24000057256							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
	RAFAEL D VALERIO						
	Name of Contact Person						
	RAFAEL'S FLOORING INC						
	Firm/ Company						
	3935 CR 216 Ste. B						
•	Address						
	OXFORD, FL 34484						
•		City/ State and Zip Code					
	rafaelstlooringinc@gmail.com	n					
	E-mail address: (to be us	ed for future annual report	notification)				
For further information	concerning this matter, pleas	se call:					
Romulo Montero		352	566-8092				
Name o	f Contact Person		le & 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)	☐\$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		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303				

Articles of Amendment Articles of Incorporation of

to

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
RAFAEL'S FLOORING INC		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:		
N/A	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:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3935 CR 216 Ste. B	
	OXFORD, FL 34484	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address		
(Florida s	treet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		
Simanua of Man	Registered Agent, if changing	
Signature of New	negmerea agem, y enunging	
Check if applicable	\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), r.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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	P		RAFAEL D VALERIO	3935 CR 216 Ste. B
Add		_		OXFORD, FL 34484
Remove				
2) Change				
Add				
Remove 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) N/A 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) N/A

The date of each amendmen		, if other than the
date this document was signed Effective date if applicable:	l. - 11/01/2024	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder a	action and shareholder
	re adopted by the shareholders. The number of votes east for the amendme ere sufficient for approval.	ent(s)
	re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
10/30 Dated	/2024	
Signature	PAS	
(B	by a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other coppointed fiduciary by that fiduciary)	
	ROMULO MONTERO	
	(Typed or printed name of person signing)	
	OFFICE ADMINISTRATOR	
	(Title of person signing)	

. . .