P94000033539

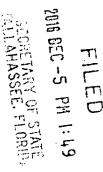
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J. S.

COVER LETTER

Division of Corporations					
NAME OF CORPORATION: Dream Floors by Gus DOCUMENT NUMBER: P94000038539					
The enclosed Articles of Amendment and fee are submitted for filing					
Please return all correspondence concerning this matter to the following.					
Gys Curren Name of Contact Person Dream Floors by Gys Firmy Company 785 8 TH Court, Suite 5 Address Vero Beach, FL 32962 City/ State and Zip Code dream floors by gys @gmail. Com E-mail Address: (to be used for future annual report notification)					
For further information concerning this matter, please call.					
Gus Curren at (772) 633-1032 Name of Contact Person at (772 Code & Daytime Telephone Nu					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					

Articles of Amendment

vo Articles of Incorporation

	ncorporation . r
Dream Floors by G	of
	ntly filed with the Florida Dept. of State)
·	^
P94000385	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
1/10	
name must be distinguishable and contain the word "corporat	The new
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or	
word "chartered," "professional association," or the abbreviation	
B. Enter new principal office address, if applicable:	NI/A
(Principal office address MUST BE A STREET ADDRESS)	
	SE OF THE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
(Manning distriction of the Manning distriction	2. F.
	·
D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office addre	<u>ss.</u>
Name of New Registered Agent W//+	
·	
(Florida s	street address)
17 9 1 1/1/2 411	CI)
New Registered Office Address:	, Florida (City) (Zip Code)
	. ,
New Registered Agent's Signature, if changing Registered Ager	
I hereby accept the appointment as registered agent. 1 am familian	with and accept the obligations of the position.
11/1	
	Registered Agent, if changing
Signature of New	кедімегеа Адет, іј спатдінд

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>PT</u>	John Doe	
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>	Address
1) Change		Augustive Cuaren	505 11th Bount Vers Beards, Fr. 3296
Add		·	
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	Making and the Control of the Contro		
Add			
Remove			
5) Change	and the same and		\
Add			
Remove			
6) Change	**************************************	**************************************	
Add			
Remove			

E. <u>If amending or adding additional Arti</u>	cles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
NA	
	/ No 1 w
a content of the comment of the comment of the content of the cont	Hart was a state of the control of t
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
NA	
70/11	
	114
A MARIN CONTRACTOR OF CONTRACT	THE DESIGN BY SEC. A AREA AND SECRET AND A SECRET AND ADDRESS AND
	Make 1 - F Metal 1 - C 1 - F 1 - C 2 - C 2 - F 2

The date of each amendment(s) adoption:	Docember 2, 2016	, if other than th
date this document was signed.	66.	
Effective date if applicable: 727	/2/2016 (no more than 90 days after amendment file date)	
	not meet the applicable statutory filing requirements,	
Adoption of Amendment(s) (CF	HECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the amen approval.	dment(s)
	he shareholders through voting groups. The following g group entitled to vote separately on the amendment	
	endment(s) was/were sufficient for approval	
by	*	
(vo	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and sha	reholder
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareho	older
Dated 12/2/16		
sel e⊶e d, by an me	sident or other officer – if directors.or officers have no corporator – if in the hands of a receiver, trustee, or off y by that fiduciary)	ot been ner court
	(Typed or printed name of person signing)	
	Director (Title of person signing)	