

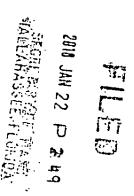
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BARGAIN BOB'S	CARPETS, INC.		
DOCUMENT NUMBI	ER: P970000520 9 7			
	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
,	ANDY L. CALIDEEN			
-		Name of Contact Person	1	
ŀ	BARGAIN BOB'S CARPETS, INC.			
-		Firm/ Company		
3	954 BYRON DR	, ,		
_		Address		
ŀ	RIVIERA BEACH, FL 3340	4		
_		City/ State and Zip Code	e	
BARG	AINBOBSFLOORING@G	MAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information ANDY CALIDEEN	concerning this matter, pleas		848-0808	
Name of	Contact Person	at (Area Co	848-0808 de & Daytime Telephone Number	
	the following amount made			
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)	
Amer Divis P.O. I	ng Address Idment Section Idment Sec	Ameno Divisio Clifton 266 I I	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

FILED

BARGAIN BOB'S CARPETS, INC.

BARGAIN BOD'S CARPETS, INC.		
(<u>Name c</u>	f Corporation as currently filed	with the Florida Dompof Sing 2 P 2 19
P97000052097		man was an analyze plant of the process of a court
	(Document Number of Corp.	oration (if known) TALETAHASSEE FEORIDA
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florid</i>	a Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
		The new
	ation "Corp," "Inc," or "Co".	company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>)		
D. If amending the registered agent an new registered agent and/or the new		Florida, enter the name of the
Name of New Registered Agent	ANDY L. CALIDEEN	
And Spires regulary writering	3954 BYRON DR	
	tFlorida street ado	tress)
New Registered Office Address:	RIVIERA BEACH	. Florida 33404
New Registered Office Madessy.	(Сиу)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		
	Standard CV Bullet	and the state of the section
	Signature of New Registe	rea Avent. Il changing

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> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	PD	JOHN J. CHARLES	3954 BYRON DR
Add			RIVIERA BEACH, FL 33404
X Remove			
2) Change	PD	JOSEPH F. CHARLES	3954 BYRON DR
Add			RIVIERA BEACH, FL 33404
X Remove			
3) Change	PD	ANDY L. CALIDEEN	3954 BYRON DR
X Add			RIVIERA BEACH, FL 33404
Remove			
4) Change	SD	ANDREW C. CALIDEEN	3954 BYRON DR
X Add			RIVIERA BEACH, FL 33404
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Allach additional cheets if necessary (* 18e specific)	
Attach additional sheets, if necessary). * (Be specific)	
<u> </u>	
<u> </u>	
	
	
<u> </u>	
<u>f an amendment provides for an exchange, reclassification, or cancellation of issued s</u>	digres,
provisions for implementing the amendment if not contained in the amendment itself	<u>:</u>
(if not applicable, indicate N/A)	
·	•
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	8)
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	शा
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholde	21
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
	RY 17, 2018	
DatedSignature	Tundy L Call-a	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other couninted fiduciary by that fiduciary)	rt
	ANDY L. CALIDEEN	
	(Typed or printed name of person signing)	
	PRESIDENT/DIRECTOR	
	(Title of person signing)	