Di ar	Porations 000000000000000000000000000000000000	962-8300 From: Ani Murad
Note	e: Please print this page and use it as a cover sheet. Type the fax audit nu (shown below) on the top and bottom of all pages of the document.	umber
	(((H11000231458 3)))	
Note	e: DO NOT hit the REFRESH/RELOAD button on your browser from this p Doing so will generate another cover sheet.	page.
	To: Division of Corporations Fax Number : (850)617-6380 From: Account Name : LEGALZOOM.COM INC. Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889 r the email address for this business entity to be used for f annual report mailings. Enter only one email address please.*	
	mail Address:	-
FFCENED 11 SEP 22 AM 8: 01 SECRETARY OF SCALE FALEAHASSEE, FLORIDA	COR AMND/RESTATE/CORRECT OR O/D RESIGN KITCHEN DESIGNS BY CLAY, CORP. Certificate of Status 0 Certified Copy 1 Page Count 04 Estimated Charge \$43.75	
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1-323-962-8300 From: Ani Muradian

#### COVER LETTER

TO: Amendment Section Division of Corporations

# NAME OF CORPORATION: KITCHEN DESIGNS BY CLAY, CORP.

# DOCUMENT NUMBER: <u>P99000085916</u>

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barbara Dang (Name of Contact Person)

Legaizoom.com, Inc. (Firm/ Company)

> 100 W. Broadway Suite 100 (Address)

(----,

Glendale, CA 91210 (City/ State and Zip Code)

at (

For further information concerning this matter, please call:

Barbara Dang (Name of Contact Person) 323 ) 962-8600 x7950 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

**\$35** Filing Fee

S43.75 Filing Fee & Certificate of Status ✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) 552.50 Filing Pee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 To: Page 4 of 6

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FILED R. R. G. L.

Articles of Amendment to Articles of Incorporation of

### KITCHEN DESIGNS BY CLAY, CORP. (Name of Corporation as currently filed with the Florida Dept. of State)

P99000085916 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

#### A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

#### B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)

С.	Enter new mailing address, if applicable:
	(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address;

Name of New Registered Agent:		
<u>New Registered Office Address:</u>	(Florida street address)	<u>_</u>
		, Florida
	(City)	(Zip Code)

#### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 3

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# 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)

Title	Name	Address	Type of Action
<u>S,T</u>	Chandra Parmiter	7935 AIRPORT PULLING RD	<ul><li>☑ Add</li><li>□ Remove</li></ul>
		Naples, FL 34109	
			Add Remove
	·		Add Remove

## E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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)

Page 2 of 3

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To: Page 6 of 6

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	(s) adoption: <u>09/14/2011</u>
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no nore mun >0 days aner amenaneni me aale)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d 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	(voting group)
	(voting group)
(	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
Signature (By sele	cied, by an incorporator – if in the nanus of a receiver, trustee, or other court
Signature (By sele	binted fiduciary by that fiduciary)
Signature (By sele	Clayton P Cox
Signature (By sele	Clayton P Cox (Typed or printed name of person signing)

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