154373

(Re	equestor's Name)
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phor	ne #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	rion:international	L HOME CENTER INTER	IOR, INC.		
DOCUMENT NUMBE	R:				
The enclosed Articles of	Amendment and fee are sul	omitted for filing.			
Please return all correspo	ndence concerning this mat	ter to the following:			
SI	IAR-ANN CALLAHAN				
		Name of Contact Person			
A	RNSTEIN & LEHR LLP				
Firm/ Company					
200 E LAS OLAS BOULEVARD, SUITE 1000					
_		Address			
F	ORT LAUDERDALE, FL	33301			
_	- -	City/ State and Zip Code	; /		
scallaha	n@arnstein.com				
		ed for future annual report	notification)		
	E-man address. (to be us	ed for future annual report	indiffication)		
For further information c	oncerning this matter, pleas	e call:			
Shar-Ann Callahan		954 at (713-7635		
Name of	Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the	ne following amount made I	payable to the Florida Depa	rtment 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)		
Ameno Divisio P.O. B	Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301		

Articles of Amendment to ... Articles of Incorporation of

INTERNATIONAL HOME CENTER INTERIOR, INC.

(Name o	of Corporation as currently	filed with the Florida Dept.	of State)	
V54373	or position agreement	Thea with the 1 for law popul	<u>or orare</u>)	
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation add	opts the following ar	nendment(s) t
A. If amending name, enter the new na	nme of the corporation:			
N/A			TF	ie new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corporat		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		N/A	<u> </u>	
C. Enter new mailing address, if applia		N/A		16
			LA LASS	EG 28
D. If amending the registered agent an new registered agent and/or the new			e of the	· 平 C
Name of New Registered Agent		1	18	
	200 E LAS OLAS BOULEVARD, STE 1000			
	(Florida stre	et address)		
New Registered Office Address:	FORT LAUDERDALE		, Florida 33301	
		City)	(Zip Coa	le)
New Registered Agent's Signature, if c				
I hereby accept the appointment as regts:	gred agent. I am Jamular w	un and accept the obligations	oj tne position. 	
	Signature of Now Re	paistered Agent if 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.

Example: X Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
<u>X</u> Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change	Р	JACOB MELDUNG	111 N POMPANO BEACH BLVD			
Add X Remove			POMPANO BEACH, FL 33062			
2) Change	PD	DANIEL MELDUNG	681-C E. SAMPLE ROAD			
X Add			POMPANO BEACH, FL 33064			
Remove 3) Change	ST	SIVAN van BUREN-MELDUNG	681-C E. SAMPLE ROAD			
X Add			POMPANO BEACH, FL 33064			
Remove						
4) Change						
Add Remove						
5) Change						
Add						
Remove						
6) Change	<u> </u>					
Add						
Remove						

ttach additional sheets, if necessary,	rticles, enter change(s) here:). (Be specific)
<u>.</u>	
·	
f an amendment provides for an ex	xchange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
	'

The date of each amendmen	t(s) adontio	October		. 2016	, if other than the
date this document was signed					
Effective date if applicable:	October_	2016			
		(no	mor	re than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block o he Departm	loes not me	et ti 's re	the applicable statutory filing requirements, this date will ecords.	not be listed as the
Adoption of Amendment(s)		(CHECK	ON	NE)	
☐ The amendment(s) was/we by the shareholders was/w	re adopted b ere sufficier	y the shareh it for approv	hold /al.	ders. The number of votes cast for the amendment(s)	
☐ The amendment(s) was/we must be separately provide	re approved ed for each	by the share voting group	ehol p en	Iders through voting groups. The following statement stitled to vote separately on the amendment(s):	
"The number of votes	s cast for the	e amendmen	ıt(s)	was/were sufficient for approval	
by					
 		(voting gr	oup	0)	
The amendment(s) was/we action was not required.	re adopted b	y the board	of	directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted t	y the incorp	юra	ators without shareholder action and shareholder	
Dated	Octob	ser 18,	. <i>6</i>	2016	
Signatur e _	Á	unot	<u>J.</u>	Stateline	_
(E	By a director	, president c	or 9	ther officer - if directors or officers have not been	_
s: aj	elected, by a ppointed fid	in incorporation in the income	Øf- at fi	- if in the hands of a receiver, trustee, or other court iduciary)	
	DAN	IEL MELDI	UN	r G	
		(Турес	d or	r printed name of person signing)	
	PRES	SIDENT/DIE	REC	CTOR	
			,	(Title of person signing)	