F2200000050

(F	Requestor's Name)			
(A	ddress)			
(A	ddress)			
(C	City/State/Zip/Phone #	<i>y</i>)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				

Office Use Only



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57/751/11 - 010.4--027 - *→BS.00

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23 #HC II. Bu 0.0.



July 26, 2023

MEVLUT BASTAS 4161 N JOHN YOUNG PKWY ORLANDO, FL 32804

Ref. Number: F2200000005 - Should be

F2200000050

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FOREIGN PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shaunteria Cobbs Regulatory Specialist II

We like

Letter Number: 523A00016829





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are forms for a change of name, duration, or jurisdiction, for a foreign profit corporation qualified to do business in Florida as required by section 607.1504, Florida Statutes.

- Complete the appropriate application for amendment attached to this letter.
- An original certificate or a document of similar import from the state of incorporation evidencing the amendment must be submitted with the application. The certificate must be issued within the past 90 days.
- Fees for the amendment are:

Filing Fee \$ 35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$ 8.75 Certificate of Status (optional) \$ 8.75

- Send one check in the total amount made payable to the Florida Department of State.
- Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

For further information, you may call (850) 245-6050.

CR2E019A (1/20)

COVER LETTER

TO: Amendme	ent Section Division of Corporation	ons	
SUBJECT: Addin	g Adam Keskin as the Authorized	d Person to Keystone Tile Inc	
DOCUMENT NU	Name	e of Corporation Keystone Tile Inc	
The enclosed Ame	ndment and fee are submitted for	filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
Yavuz Ipek			
	Name of Contact Person		
Keystone Tile Inc			
	Firm/Company		
4161 N John Youn	g Pkwy		
	Address		
Orlando FL 32804			
	City/State and Zip Code		
bastasm@keystone			
E-mail addre	ss: (to be used for future annual r	eport notification)	
	ition concerning this matter, plea	se call:	
	ruz Ipek	at ()	
Name	of Contact Person	Area Code & Daytime	Felephone Number
Enclosed is a check	for the following amount:		
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee Certificate of Status Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION 1 (1-3 MUST BE COMPLETED)

	F22	00000050		
	(Document nu	imber of corporation (if kno	own)	
Keystone Tile	Inc			
(Nar	ne of corporation as it app	pears on the records of the l	Department of State)	
. Florida		3. 01/03/203		
(Incorporated	under laws of)	(Date	authorized to do business	s in Florida)
		SECTION II		
	(4-7 COMPLETE ON	SLY THE APPLICABLE	CHANGES)	
4. If the amendment changes the nan	ne of the corporation, who	en was the change effected	under the laws of its juris	sdiction of
incorporation?				
Keystone Tile Inc				<i>r</i>)
(Name of corporation after the an not contained in new name of the	nendment, adding suffix "	corporation," "company," o	or "incorporated," or app	ropriate abbreviation.
not contained in new name of the	Corporation)			Es
(If new name is unavailable in Flo	rida, enter alternate corpe	orate name adopted for the r	ourpose of transacting bu	siness in Florida)
			PH :	
6. If the amendment changes th	e period of duration, indic	cate new period of duration		13
				ω ,
	_	(New duration)		
7. If the amendment changes th	e jurisdiction of incorpora	ntion, indicate new jurisdict	ion.	
	_			
	1	(New jurisdiction)		
8. If amending the registered agen			r the name of the	
new registered agent and/or the		ddress:		
Name of New Registered Age	Adam Keskin			_
				_
		rida street address)		
New Registered Office Address	4161 N John Young Pk		Florida	
		(City)	(Zip	Code)
New Registered Agent's Signat				
I hereby accept the appointment of	is registered agent. Tam • 1/2	s familiar with and accept to	he obligations of the posi	ition.
	ful			
Signature of No	rw Registered Agent, if ch	anging		

Title/ Capacity	Name	Address Ty	rpe of Action
Manager	Adam Keskin	4161 N John Young Pkwy Orlando FL 32804	X Add
			Remove
			CRemove
			_ QAdd
			Remove
	<u>. </u>		🗆 Add
			Remove
			□Add
			Remove
Attached is a of the application under the law	ecertificate or document of similar import, ation to the Department of State, by the Secres of which it is incorporated.	evidencing the amendment, authenticated not me etary of State or other official having custody of ec	ore than 90 days prior to delive reporate records in the jurisdiction
	(Signature of a dire	ector, president or other officer - if in the hands of court appointed fiduciary, by that fiduciary)	
	Meylut Bastas (Typed or printed name of person signing	Presiden	<u>+ </u>

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

FILING FEE \$35.00