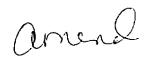
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MAY 14 2021 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	RPORATION: EMPIRE MARBLE	E INC	
DOCUMENT N	F96897		
The enclosed Arti	icles of Amendment and fee are su	bmitted for filing.	
Please return all c	correspondence concerning this ma	tter to the following:	
	ANDREW W MORRIS		
	EMPIRE MARBLE INC	Name of Contact Person	
		Firm' Company	
	11750 PHILIPS HWY		
	JACKSONVILLE FL 32256	Address	
		City/ State and Zip Code	
	SURFACES1193@BELLSO	UTH.NET	
	E-mail address: (to be us	sed for future annual report	notification)
For further inform	nation concerning this matter, pleas	se call:	
SUSAN DUPON	Τ	904 at (268-6332 le & Daytime Telephone Number
Name of Contact Person		Area Coc	le & Daytime Telephone Number
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fe	ce ☐S43.75 Filing Fee & Certificate of Status	□843.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

cles of Incorporation FILE

EMPIRE MARBLE INC

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

FILED 2021 MAR -5 PM 3.

(Name of Corporation as curren	ntly filed with the Florida Dept. of State) " 5. UU
F96897	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	as Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.,	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRESS)	
C. Carana and the said and the	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
·	
D. If amending the registered agent and/or registered office as	ddress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Vanna of Maria Basimon of America NA	
Name of New Registered Agent	
(FL)	
(r tortau	street address)
New Registered Office Address:	, Florida
	tCity) (Zip Codes
New Registered Agent's Signature, if changing Registered Age	unt:
Thereby accept the appointment as registered agent. I am familia	
	
Signature of New	v Registered Agent, if changing
Check if applicable	

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>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	ST	SUSAN DUPONT	11750 PHILIPS HWY
Add X			JACKSONVILLE FL 32256
Remove 2) Change	VP	JOHN LAUREANO	11750 PHILIPS HWY
Add			JACKSONVILLE FL 32256
X Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Atta	nending or adding additional Arti th additional sheets, if necessary).	(Be specific)	<u></u> ,	
NA	,	,		
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F Ifan	amendment provides for an exch	gange reclassification	or cancellation of iss	ned charec
pro	visions for implementing the ame	ndment if not contain	ed in the amendment	itself:
	(if not applicable, indicate N/A)			
NA				
		,,,,,,		
			<u>. </u>	
		· · · · · · · · · · · · · · · · · · ·		

	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 o	date)
	is block does not meet the applicable statutory filing require Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the sufficient for approval.	e amendment(s)
	approved by the shareholders through voting groups. The foli- for each voting group entitled to vote separately on the amend	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
3/2/202	1	
Dated		
Signature	Cololellani	
sele	a director, president or other officer – if directors or officers heeted, by an incorporator – if in the hands of a receiver, trustee jointed fiduciary by that fiduciary)	
	ANDREW W MORRIS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	