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(Address)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOM TILE LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Oleg Tuzhanskiy
Name of Person
TOM TILE LLC
Firm/Company
4341 Misty Ln
Address
Lynn Haven, FL 32444
City/State and Zip Code
tuzhik@live.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Oleg Tuzhanskiy at (850) 890-1188
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TOM TILE LLC

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
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MGRM	Serik Baididin	510 Paddock Club Cr.	<input type="checkbox"/> Add
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	Panama City Beach, FL		<input checked="" type="checkbox"/> Remove
--	-----------------------	--	--

32444

MGRM	Yaroslav Vdovichenko	157 Damon Circle	<input checked="" type="checkbox"/> Add
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	Panama City Beach, FL		<input type="checkbox"/> Remove
--	-----------------------	--	---------------------------------

32407

☐ Add

☐ Remove

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TALLAHASSEE, FLORIDA

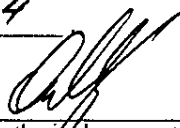
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated February 5th, 2014



Signature of a member or authorized representative of a member

Oleg Tuzhanskiy

Typed or printed name of signee

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TALLAHASSEE, FLORIDA