POI 000073699

(Requestor's	Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Joseph lpp	olito Custom Tile	e, Inc
DOCUMENT NUME	BER: P0100007369	9	
	of Amendment and fee are su		
Please return all corres	pondence concerning this ma	tter to the following:	
	Joseph Ippolito		
		Name of Contact Person	1
	Joseph Ippolio C	ustom Tile, Inc	
		Firm/ Company	
	3118 W Sligh Ave	9	
•		Address	
	Tampa, FL 33614	4	
		City/ State and Zip Code	e
	E-mail address: (to be us	sed for future annual report	notification)
		_	
For further information	n concerning this matter, pleas	se call:	
Joseph Ippoli	ito	012	403 1006
		at (813	493-1006
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made [payable to the Florida Depa	urtment 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)
	ling Address		Address
	ndment Section sion of Corporations		ment Section on of Corporations
	Box 6327		Building
	hassee, FL 32314	2661 E	xecutive Center Circle
,		Tallaha	issee, FL 32301

Articles of Amendment to Articles of Incorporation of

Joseph Ippolito Custom Tile, Inc.	
(Name of Corporation as currently filed with the E	Florida Dept. of State)
P01000073699	
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation "	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	39248 US HWY 19 N
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Lot 312
	Tarpon Springs, FL 34689
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Tarpon Springs, FL 34689 39248 US Hwy 19 N Lot 312 Tarpon Springs, FL 34689
	Lot 312
	Tarpon Springs, FL 34689
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address. Name of New Registered Agent	ress in Florida, enter the name of the
Name of New Register on Agent	
(Florida st	reet address)
New Registered Office Address:	, 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, ij 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 <math>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	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	VP	Ronald P Davenport	3118 W Sligh Ave Tampa, FL 33614
2) Change Add Remove			
3) Change Add Remove			·
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	 		

(attach additional sheets, if necessary).	(Be specific)
N/A	
(if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself;
N/A	
, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

The date of each amendment(s) a	12/30/2016
	2/30/2016
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cast	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder
_{Dated} 12/30/	2016
Signature (Ry 2)	director, president or other officer - if directors or officers have not been
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Ronald P Davenport
	(Typed or printed name of person signing)
	VP (removed)
	(Title of person signing)