P04000037442

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BOONE TILE CONTRACTING INC.				
DOCUMENT NUMBER: P04000037442				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
DELAUNA BOONE Name of Contact Person				
BOONE TILE CONTRACTING INC. Firm/ Company				
19228 LAKE ALLEN ROAD Address				
LUTZ FL 33558 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
DELAUNA BOONE at 813 842-9731 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation of

DIVISION OF CORPORAL STAN
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Boone T	ile Contrac		PH II LO
	ooration as currently filed with t	the Florida-Dept. of State)	• • •
P04000037442			
(I	Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, this Florida Prof.	it Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of	the corporation:		
			_The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co". A proj	ny," or "incorporated" or the c fessional corporation name must	abbreviation contain the
B. Enter new principal office address, if appl	licable:		
(Principal office address MUST BE A STREET	<u>(ADDRESS</u>)		
			·····
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>		
			<u> </u>
,			
D. If amending the registered agent and/or renew registered agent and/or the new regis		la, enter the name of the	
	acted viller and ess.		
Name of New Registered Agent			
			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing	ng Registered Agent:		
I hereby accept the appointment as registered a	gent. I am familiar with and acc	ept the obligations of the position.	
	Signature of New Registered Ag	zent if chanoina	_

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	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		GLENN BOONE	19228 LAKE ALLEN RE
Add			LWT2 FL 33558
× Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			4*
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

писл инипони опесы, у пессыя у).	icles, enter change(s) here: (Be specific)
······	
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. 18-1	
And the second s	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: _	AUGUST	27,2015	, if other than the
date this document was signed.			SERVERABLE
Effective date <u>if applicable</u> :			DIVISION OF CORPORATION
	(no more than 90 days aj	ter amendment file date)	15 AUG 31 PH 1:49
Note: If the date inserted in this block does document's effective date on the Department o		utory filing requirements	, this date will not be listed as the
Adoption of Amendment(s) (C)	HECK ONE)		
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		of votes cast for the amer	ndment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes cast for the ame	endment(s) was/were sufficie	ent for approval	
by		**	
(ve	oting group)		
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without	shareholder action and sha	areholder
The amendment(s) was/were adopted by the action was not required.	e incorporators without share	cholder action and shareho	older
Dated Augus	T 27, 2013	2	
Signature			
	sident or other officer = if d	rectors or officers have n	ot been
	corporator – if in the hands o	f a receiver, trustee, or of	her court
appointed fiduciar	ry by that fiduciary)		
$\mathcal{D}_{\mathcal{E}}$	LAUNA BOO	NE	
	(Typed or printed name of p	person signing)	
<i>P</i>	RESIDENT		
	(Title of person	signing)	