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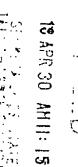


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R. WHITE MAY 0.3 2018



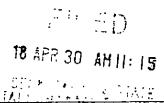
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	A TO Z MARBLE	AND GRANITE INC			
DOCUMENT NUME					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	FATMA KALYAN				
	Name of Contact Person				
	A TO Z MARBLE AND GRANITE INC				
	Firm/ Company				
	1863 NW 29TH STREEET				
	Address				
	OAKLAND PARK, FL 33311				
	. <u></u>	City/ State and Zip Cod	e		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
To take momano	remeering this matter, piea.	se can.			
FATMA KALYAN		954 at (557-3249		
Name o	of Contact Person	at () 557-3249 Area Code & Daytime Telephone Num			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State;		
S35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, Ft. 32301

Articles of Amendment to Articles of Incorporation of



A TO Z MARBLE AND GRANITE INC

	17.5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Name of Corporation as currently	filed with the Florida Dept. of State)
P04000116081	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	77
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	lo". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
new registered agent and/or the new registered office address.	
Name of New Registered Agent	
(Florida stre	et address)
(1 to late sire	Ci 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 w	ith and accept the obligations of the position.
Signature of New Ro	gistered Agent, if 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 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)	Title	Name	<u>Addres</u> s	
I) Change	P	BLIGE UZUN	1863 NW 29TH ST	
Add			OAKLAND PARK, FL 33311	
X Remove				
2) Change	P	FATMA KALYAN	1863 NW 29TH ST	
X Add			OAKLAND PARK, FL 33311	
Remove				
3) Change			41-1-1	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
δ) Change				
Add				
Remove				

			 		
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an amendment provides for an exc provisions for implementing the am	hange, reclas	sification, or o	cancellation of i	ssued shares,	
(if not applicable, indicate N/A)	enament ii no	t compiled ii	riic amendiici	it ristii.	
	-	·	- -		, .
					
	· - ·			<u> </u>	

	t(s) adoption:	, if other than the
date this document was signed	- 04/25/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes east for the amendmeter sufficient for approval.	ent(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	ement
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareh	older
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholde	r
AF Dated	PRIL 25 2018	
Signature	1 to the total	
(1	by a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other ppointed fiduciary by that fiduciary)	
	FATMA KALYAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	