## P050000 51078

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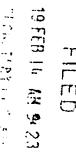


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## COVER LETTER

**TO:** Amendment Section Division of Corporations

• • • • • •

NAME OF CORI	PORATION: VILLABLANCA	TILE, INC.	
DOCUMENT NU	JMBER: P05000051078		
The enclosed Artic	cles of Amendment and fee are su	ibmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	JUAN CASIMIRO		
		Name of Contact Person	1
	VILLABLANCA TILE, INC	•	
		Firm/ Company	
	5506 SW 128 AVE		
		Address	·
	MIAMI, FL 33175		
		City/ State and Zip Code	c
For further inform	ation concerning this matter, pleas	sed for future annual report	notificationy
Judy Leon		at (	776-6983
Na	me of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	rtment 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		Amend Divisio Clifton 2661 E	Address  ment Section on of Corporations  Building xecutive Center Circle assec, FL 32301

## Articles of Amendment to Articles of Incorporation of

VILLABLA	NCA T	ILE.	INC.
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	y filed with the Florida Dept. of Stat	<u>e</u> )		
05000051078				
(Document Number of	Corporation (if known)			
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> s Articles of Incorporation:	Florida Profit Corporation adopts the	followin	g amei	ndment(s
. If amending name, enter the new name of the corporation:				
			_The	new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cord "chartered," "professional association," or the abbreviation "I	Co". A professional corporation nan			
Enter new principal office address, if applicable:				
Principal office address <u>MUST BE A STREET ADDRESS</u> )				
				_
		1>'.:		
			<u> </u>	
Enter new mailing address, if applicable:			B	71
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			f.	<u> </u>
		<u> </u>	723	
			<b></b>	0
	<del></del>	: -	<u> (a)</u>	<del></del>
. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the	∵."	ప	
new registered agent and/or the new registered office address:				
Name of New Registered Agent				
			-	
(Elmido utus	ant addings)		-	
(Florida stre	vet address)		-	
New Registered Office Address:	vet address), Florida_(City)	(Zip (	-	

## 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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	Oscar Casimiro	5506 SW 128 AVE
X Add			MIAMI, FL 33175
Remove			
2) Change			
Add			
Remove			
3 ) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			<u> </u>
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
_ <del>.</del>	
· · · · · · · · · · · · · · · · · · ·	
f	nange, reclassification, or cancellation of issued shares,
i ao amendmeni ntavides fot an eych	
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:

The date of each amendment date this document was signed		, if other than th
Effective date if applicable:	January 1st, 2019	
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 dathe Department of State's records.	e will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s ere sufficient for approval.	)
	re approved by the shareholders through voting groups. The following stateme ed for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	r
action was not required.	,	
1/1/19 Dated		
Signature	y y	
Sc	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	Juan Casimiro	
	(Typed or printed name of person signing)	
	DPST	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·