PO5000119879

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(Business Entity Name)
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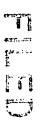


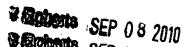
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SECNETARY OF STATE
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 27, 2010

CINDY CARTWRIGHT TILE PRO OF WEST PALM BEACH, INC. 3426 S. MILITARY TRAIL LAKE WORTH, FL 33463

SUBJECT: TILE PRO OF WEST PALM BEACH INC.

Ref. Number: P05000119879

. We have received your document for TILE PRO OF WEST PALM BEACH INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Letter Number: 310A00020607

Tina Roberts Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Tile Pro of West Palm Beach, I	'nC
DOCUMENT NUMBER: P05000119879	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Cindy Cartwright Name of Contact Person	
ile Pro of West Palm Beach, I	nc
Address Suite 1	
Lantana FL 33462 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Cindy Carturight at (561). 9645025 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 \$\times \text{S43.75 Filing Fee & Certificate of Status}\$\$ Certificate of Status (Additional copy is enclosed) \$\text{Certified Copy (Additional Copy is enclosed)}\$\$ Certified Copy (Additional Copy is enclosed)	d)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment				
to				
Articles of Incorporation of				
(Name of Corporation as currently filed with the Florida Dept. of State) (Name of Corporation as currently filed with the Florida Dept. of State)				
(Name of Corporation as currently filed with the Florida Dept. of State)				
POS 000 119879				
(Document Number of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
A. If amending name, enter the new name of the corporation:				
The new				
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."				
B. Enter new principal office address, if applicable: 601 Whitney Ave				
(Principal office address MUST BE A STREET ADDRESS)				
SUITE I				
Lantang, FL 33462				
, , , , , , , , , , , , , , , , , , ,				
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 in Florida, enter the name of the				
new registered agent and/or the new registered office address:				
Name of New Registered Agent: Gindy Carturiant				
601 whitney Ave Suite 1				
New Registered Office Address: (Florida street address)				
Lantana, Florida 33462 (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, if changing				

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)				
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action	
		<u></u>		
			B Remove	
	***************************************	C	Add Remove	
	nding or adding additional Ar additional sheets, if necessary).			
				
provis		change, reclassification, or cancellation or c		
		6		

The date of each amendment	(s) adoption: August 23, 2010
• `	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of-Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	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 statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	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 shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	9/1/2010
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)