

P 05000147444

(Requestor's Name)

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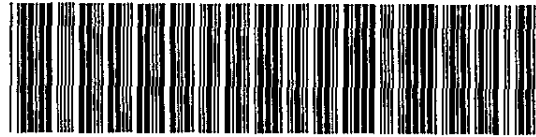
(Business Entity Name)

(Document Number)

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FILED  
2005 NOV 18 PM 12: 55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend.*

G. Ouellette NOV 22 2005

**TRANSMITTAL LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: EMERALD COAST TILE, INC

DOCUMENT NUMBER: ~~POS000147444~~ POS000147444

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LARRY E EARLY, CPA  
(Name of Person)

LARRY E EARLY, CPA, PA  
(Name of Firm/ Company)

PO BOX 334  
(Address)

GORZALES, FL 32560  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

LARRY E EARLY, CPA at (550) 928-2508  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$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 (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  
409 E. Gaines Street  
Tallahassee, FL 32399

2006 NOV 18 PM 12:55  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment to  
Articles of Incorporation of

EMERALD COAST TILE, INC

(Name of corporation as currently filed with the Florida Dept. of State)

~~705000147444~~ PO5000147444

(Document number of corporation, if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its articles of incorporation:

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

**AMENDMENTS ADOPTED-** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

SEE ATTACHED

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

N/A

(continued)

NAME / INFORMATION  
OFFICER / DIRECTOR NAME AND ADDRESS

1. DELETE THE FOLLOWING NELSON AS  
SECRETARY - TREASURER :  
\* Samuel L Loftin will stay as Pres.

SAMUEL L. LOFTIN (Pres.)  
11654 WAREFIELD DR  
PENSACOLA, FL 32514

2. ADD THE FOLLOWING PERSON AS  
SECRETARY - TREASURER AND DIRECTOR

SHARON R. LOFTIN (S/T)  
11654 WAREFIELD DR  
PENSACOLA, FL 32514

3. ADD THE FOLLOWING PERSON AS  
VICE - PRESIDENT

BRIAN MCKINDALL (V.P.)  
8502 WALBERT AV  
PENSACOLA, FL 32534

The date of each amendment(s) adoption: NOVEMBER 16, 2005

Effective date, if applicable: NOVEMBER 16, 2005  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 16<sup>TH</sup> day of NOVEMBER, 2005.

Signature *Samuel L. Loftis*  
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

SAMUEL L. LOFTIS  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)

FILING FEE: \$35