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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: PULIDO TI	LE INSTALLATI	ON CORP.
DOCUMENT NUMBER	. P07000	0024880	
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspon	idence concerning this mat	ter to the following:	
L/	AZARO VALDE	S	
	<u> </u>	Name of Contact Person	
	PULIDO TI	LE INSTALLATI	ON CORP
		Firm/ Company	
	2325	W GRACE ST	
		Address	
	TAM	PA, FL 33607	
		City/ State and Zip Code	3
wand	a.castaneda@h	otmail.com	
	E-mail address: (to be us	ed for future annual report	notification)
For further information co	ncerning this matter, pleas	e call:	
LAZARO VALD	ES	at (813	843-9089
Name of C	ontact Person		de & Daytime Telephone Number
Enclosed is a check for the	e following amount made p	payable to the Florida Depa	rtment of State:
□ \$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 Certified Copy (Additional Copy is enclosed)
Amendn Division P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

0	f		
PULIDO TILE INSTALLATION CORP			
(Name of Corporation as currently filed with the	Florida Dept. of State)		
P07000024880	<u>,</u>		
(Document Number of Corporation ((if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation ado	pts the following	amendment(s)
A. If amending name, enter the new name of the corporation:			
PULIDO TILE AND REMODELING, COF	RP.		The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporati	ated" or the abo	breviation
B. Enter new principal office address, if applicable:	LAZARO VALDE	S	
(Principal office address MUST BE A STREET ADDRESS)	2321 W GRACE	ST	
	TAMPA, FL 3360)7	
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 add new registered agent and/or the new registered office addres		of the	
Name of New Registered Agent			
(Florida si	treet address)		
New Registered Office Address:	, Florida		
(City	<i>)</i>	(Zip Code)	
			-4
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		of the position	AMA A

14 MAR 25 PH 11:47

Signature of New Registered 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)	<u>Title</u>	Name		<u>Addres</u> s
1) Change	<u></u>	N/A		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) 🗍 🗇				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

/A	dditional sheets	additional Art s, if necessary).	(Be specific)			
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The date of each amendmen		, if other than the
date this document was signed		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more inan 90 days after amenament file date)	
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) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"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 shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_03/	13/2014	
Signature _	Lasore Mille	
	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 ppointed fiduciary by that fiduciary)	
	• • • • • • • • • • • • • • • • • • • •	
	LAZARO VALDES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	