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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: JVL TILE INSTALLERS CO	P.
DOCUMENT NUMBER: P07000124966	
The enclosed Articles of Amendment and fee are submitted fo	। r filing.
Please return all correspondence concerning this matter to the	following:
LAZARO VICTORERO	
Name o	of Contact Person
JVL TILE	
Fir	m/ Company
491 SW 131ST AVE	
	Address
DAVIE, FL 33325	
City/ S	tate and Zip Code
NEYDAVICTORERO@GMAIL.COM	
E-mail address: (to be used for futu	ire annual report notification)
For further information concerning this matter, please call:	
LAZARO VICTORERO	at () 316-2971
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:
Certificate of Status Certificate	Filing Fee & S52.50 Filing Fee Ged Copy 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, FL 32301

Articles of Amendment to Articles of Incorporation of

JVL TILE INSTALLERS CORP.	
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P07000124966	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporatio	 g:
At transferred free the new name of the gorphouse	
name must be distinguishable and contain the word "corpe" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." word "chartered," "professional association," or the abbrevia	The new pation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
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 new registered agent and/or the new registered office ad Name of New Registered Agent	address in Florida, enter the name of the dress:
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Albereby accept the appointment as registered agent. I am fair	iliar with and accept the obligations of the position.
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 Do	<u>e</u>		
X Remove	<u>V</u>	Mike Joi	nes .		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change	V		HERNANDEZ, L	VIS E	1115 W 39 TER
X Add		_			HIALEAH, FL 33012-4135
Remove					
2) Change		_			
Add					
Remove					
3)Change					
Add				No.	<u> </u>
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

amending or adding additional Articles, enter change ttach additional sheets, if necessary). (Be specific)	
tach didinonal sheets, y necessary, - (ive specific)	
	-
	-
	
	<u> </u>
an amendment provides for an exchange, reclassifica	tion, or cancellation of issued shares,
provisions for implementing the amendment if not con	tained in the amendment itself:
(if not applicable, indicate N/A)	
. ,,	
	
	<u> </u>

04/26/2019	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
04/26/2019	
Effective date if applicable:	
(no more tha	n 90 days after amendment file date)
Note: If the date inserted in this block does not meet the ap document's effective date on the Department of State's records	plicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders, by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/	were sufficient for approval
by(voting group)	."
(voting group)	
☐ The amendment(s) was/were adopted by the board of direct action was not required.	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder
4/26/2019	
Dated / /	
Signature	
(By a director, president or other	officer - if directors or officers have not been
selected, by an incorporator - if i	n the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduci	ary)
LAZARO VICTORERO	
(Typed or prin	ted name of person signing)
PRESIDENT	
777	ide of person signing)
(1	itle of person signing)