

Florida Department of State

Division of Corporations Public Access System

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(((H09000231664 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

COR AMND/RESTATE/CORRECT OR O/D RESIGN

PRESTIGE MARBLE POLISHING LG, CORP.

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10/30/2009

EMPIRE CORP KIT

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3)	Articles of Amendment to Articles of Incorporation of	H09000231664						
Prestige (Name of Corporation as cu	Marble Polis	hing LG, Corp.	A					
P08000 10 3 (Document N	(003 lumber of Corporation (if known)		1					
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation	006, Florida Statutes, this <i>Florid</i> 1:	da Profit Corporation adopte the follow						
A. Hamending name, enter the new name State Musple name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to	ENTI OVISE I the word "corporation," "co	COY O. The new y	5					
name must contain the word "chartered," "p B. Enter new principal office address, if sp	rofessional association," or the	abbreviation "P.A." SW 39 Terrace SW 39 Terrace						
(Principal office address MUST BE A STRE	EET ADDRESS)	11, FL 33165						
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		5W 39 7819ad FL 33165						
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:		····						
New Registered Office Address:	(Florida street addre	12)	•					
	(City)	, Florida (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 Age	nt, if changing						

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HU9000231464

If smending 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)

Title Name Address Type of Action

Add
Remove

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

☐ Add ☐ Remove

_					
F.	If an amendment provides for an 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)				
	(if not applicable, indicate N/A)				
	(If not applicable, indicate N/A)				

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₩	•	inlantna	H09000231664
The date of each amendment	(s) adoptien:	date of adoption is required	
Effective date if emplicable:	(no more than 90 de	nys ofter amountment file date	j
		`	
Adoption of Amendment(s)	(CHEC	KONE)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the share re sufficient for appro	reholders. The number of vo oval.	ties cast for the amendment(s)
The amendment(s) was/wer must be separately provided	e approved by the shi I for each voting grou	archolders through voting gr up entitled to vote veparately	oups. The following statement on the amendment(s):
"The number of votes of	ast for the smendmen	ou(s) was/were sufficient for	approval
by			
+	(voting group)		
The amendment(s) was/were action was not required.	e adopted by the boar	d of directors without sharel	nolder action and shareholder
The amendment(s) was/work action was not required.	adopted by the inco.	rporators without shareholds	er action and shareholder
Dated	130/09		
Signature			
Selec		r other officer — if directors of or — if in the hands of a recai t fiduciary)	
	Lys	Van Jime printed name of person sign	nez_
	(Typied or	r printed name of person sign	orus)
	Q	resident	~
	(Mide of perso	on signing)	

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