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Account Name : ASAP ACCOUNTING SERVICES INC

Account Number : I2018000009 Phone

: (239)352-4099

Fax Number

: (239)919-8333

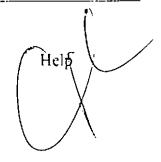
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ADRIANA MARBLE & TILE INC

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Page Count	61
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Corporate Filing Menu



## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: ADRIANA MARBLE & TILE INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: **BOGDAN MIRCESCU** Name of Contact Person ADRIANA MARBLE & GRANITE INC Firm: Company 2069 RIVER REACH DRIVE - APT 414 Address NAPLES, FL 34104 City State and Zip Code asapaccounting@me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: BOGDAN MIRCESCU act (239) 465-2325 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & S43.75 Filing Fee & S\$2.50 Filing Fee 🛢 - \$35 Filling Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

ADRIANA MARBLE & TILE INC			
(Name o	of Corporation as currently	filed with the Florida Dept. o	f State)
P09000062611			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Fl	lorida Profit Corporation adop	ots the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		2023
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cartered," "professional association,"  B. Enter new principal office address, (Principal office address MUST BE A S	Torp." "Inc," or "Co". A or the abbreviation "P.A."  If applicable:	mpany," or "incorporated" or professional corporation nan	the abbrevius "Com," no must continue the SSE SE
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)  D. If amending the registered agent as	OFFICE BON)  nd/or registered office addre	ess in Florida, enter the name	of the
new registered agent and/or the ne			
Name of New Registered Agent	ADRIANA MIRCESCU		<del></del>
	2069 RIVER REACH DRIV	<sup>7</sup> E - APT 414	
	(Florida stree	et address)	
New Registered Office Address:	NAPLES		34104 Florida
	10	Circa	(Zip Code)
New Registered Agent's Signature, if a line of the self-wave accept the appointment as regis	changing Registered Agent: tered agent. I am familiar w	ith and accept the obligations o	of the position.
	Signature of New Re	gistered Agent, if changing	

Check if applicable

The amendment(s) is are being filed pursuant to s. 607.0120 (11) (c), F.S.

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> <u>Jo</u>	<u>ha Doc</u>	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>\$V</u> <u>Sa</u>	ally Smith	20
Type of Action (Check One)	Titie	Name	Address 2069 RIVER REACH DRIVE 2
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Remove			NAPLES, FL 34104 PM
2) X Change	VP	BOGDAN MIRCESCU	2069 RIVER REACH DRIVE
Add		• • • • • • • • • • • • • • • • • • •	APT 414
Remove Change			NAPLES, FL 34104
Add			
Remove			
4) Change			
Add			
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5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment provides for an exchange, reclassification, or cancellation of issued shares, revisions for implementing the amendment if not contained in the amendment itself.  (if not applicable, indicate N/A)	ach additional sheets, if necessary) (Be specific)	
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	JULY 11, 2023	
The date of each amendmen	· · · · · · · · · · · · · · · · · · ·	_, if other than the
date this document was signed		
nee at a second to the	JULY 11, 2023	
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
	ino more men in days aper uncomment fact una	
	this block does not meet the applicable statutory filing requirements, this date will reduce the Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was we action was not required.	re adopted by the incorporators, or board of directors without shareholder aution and s	
	re adopted by the shurcholders. The number of votes east for the amendment(s) ere sufficient for approval.	2023 AUG 23
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	23 MID: 44
"The number of votes	s cast for the amendment(s) was were sufficient for approval	A OF STATE
by		
	(voting group)	
07.111 Dated	/2023	
Signature	J	
\$1	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 proported fiduciary by that fiduciary)	
	BOGDAN MIRCESCU	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	<del></del> -
	(Title of person signing)	