P10000057624

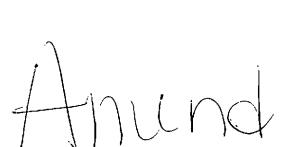
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

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Division of Corpo			
NAME OF CORPOR	ATION: <u>LUCIAN</u> BER: <u>PADOOO</u>	057624	UD MARBLE, INC
	of Amendment and fee are su		
Please return all corres	pondence concerning this man	tter to the following:	
	Luci	ANO LO	PARDO "MARBLE, INC.
_	Luciano	TILE AND	MARBLE, INC.
_	4470 Li	Firm/ Company EO L-ANE.	
_	PALM BE	Address	ZNS, PL 33410
	E-mail address: (to be us	City/ State and Zip Cod	PENS, PL 33410 le - Net (notification)
For further information	concerning this matter, pleas	se call:	
Luc	TANO LOPA	200 at (561 Area Co	Z6Z-3Z90 Ode & Daytime Telephone Number
	the following amount made :		
,	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certifled Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
* ·	Com A. J. Boron	Strant	A difference

Mailing Address

TO: Amendment Section

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



April 22, 2019

LUCIANO LOPARDO 4470 LEO LANE PALM BEACH GARDENS, FL 33410

SUBJECT: LUCIANO TILE AND MARBLE, INC.

Ref. Number: P10000057624

We have received your document for LUCIANO TILE AND MARBLE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 019A00008063

Irene Albritton Regulatory Specialist II

119 HAY | 4 AH 10: 30



April 9, 2019

LUCIANO LOPARDO 4470 LEO LANE PALM BEACH GARDENS, FL 33410

SUBJECT: LUCIANO TILE AND MARBLE, INC.

Ref. Number: P10000057624

We have received your document for LUCIANO TILE AND MARBLE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 219A00007115

RECEIVED PHIZ: 03

Articles of Amendment to

	Articles of Ame to Articles of Incor		2019	Pig. 3.58
LUCPANO T	ON AND	MARSLE	الم الم	Pin
(Name of C	Corporation as currently f		ept. of State)	5. 58
P1000005	7624			
	(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06. Florida Statutes, this Flo	orida Profit Corporation	adopts the follow	ng amendment(s) to
A. If amending name, enter the new name	e of the corporation:			
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio	on "Corp," "Inc," or "Co	 A professional corpe 	rporated" or the oration name mus	The new abbreviation t contain the
B. Enter new principal office address, if a	annlianhla:	4470	LEO L	ANE.
(Principal office address MUST BE A STR		PALM BZA		
		FORIDA		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF				
D. If amending the registered agent and/o new registered agent and/or the new r		s in Florida, enter the n	name of the	
new registered agent and/or the new r) _ U c? ANO	ALSER	JR DO	
Name of New Registered Agent		ZO LAN	·	
New Registered Office Address:		address) CH EHRDENS (IV)	. Florida FL	-33410 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 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: <u>X</u> Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Sm	nith_		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) X Change	PT	•	CURIOUL	ECPARDO	4470 LEO LANE.
Add		_			PALM BEACH GARDENS
Remove					PORIOA 33410
2) K Change	VS	_	LuciANO	ALOPARDO	4470 LED LANE.
Add					PALM BEACH GARDENS
Remove	ایما		\ .	\	FORIDA 33410
3) Khange	<u>S√</u>	_	LULIAN	o Lopanyo	4470 LEO LANE
Add					PAIN BEACH GARDENS
Remove					FWEDA 33400
4) Khange	TR	_	LUCIAND	ALOPANO	PALM BEAG EARDENS
Add					
Remove					PLO RIDA 233410 3341
5) Change					
Add		_			
Remove					
6) Change	-	_			
Add					····
Remove					

ttach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 327 2:019 date this document was signed.	, if other than the
Effective date if applicable: 416 2019	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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 LUCIAND LOPARDO " (voting group)	
(voting group)	
LThe 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.	
Dated 4/16/19	
Signature Automorphical	
(By a director, president of other officer – if directors or officers have not been	
sclected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
LUCIANO LOPARDO	
(Typed or printed name of person signing)	
FT.	
(Title of person signing)	 _