P10000062974

| (Re | questor's Name) |
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| (Ad | dress) |
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| (Cit | y/State/Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| (Bu | siness Entity Name) |
| | |
| (Do | cument Number) |
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Amend



SEP 0 5 2012

T. ROBERTS

COVER LETTER

| Division of Corporations | | | | |
|---|--|--|--|--|
| NAME OF CORPORATION: AM2 DOCUMENT NUMBER: P 10000 | Tile Wood 062974 | e marble inc | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| Mail | Oha Orti Name of Contact Person | 2 | | |
| | rame of contact reison | ' | | |
| 1369 | Firm/Company 3 Golden | Russet Dr | | |
| Winter G | Arden FL | 34787 | | |
| E-mail address: (to be use | City/State and Zip Cod | -0m | | |
| For further information concerning this matter, please call: | | | | |
| Mailoha Ortiz | at (321 | 2396544 | | |
| 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: | | | | |
| \$35 Filing Fee & Gertificate 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) | | |
| Mailing Address | Street | Address | | |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

| (Name of Corporation as currently filed with the Florida Dept. of State) Am 2 Tile Wood May ble inc P10000062974 |
|--|
| (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| A. If amending name, enter the new name of the corporation: |
| The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 5590 Arnold Palmer Dr +334 Orland office 32811 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 13693 Golden Russet Dr Winter garden, FL 34787 |
| 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: (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 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> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | 5 | <u>Celio Almeida</u> | 5590 Arasld Palmer Dr #334 |
| Add | | | # 334 |
| Remove | | | Orlando, E 32811 |
| 2) Change | · · · · · | | |
| Add | | | |
| Remove | | | |
| 3) Change | | _ | |
| Add | | | <u></u> |
| Remove | | | |
| 4) Change | ···· | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| The date of each amendment(s) adoption: 8/20/12 |
|--|
| Effective date if applicable: 8 20 12 |
| (no more than 90 days after amendment file date) |
| |
| 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" (voting group) |
| (voting group) |
| ☐ The 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 8 20 12 |
| Signature (By a director, president or other officer – if directors or officers have not been |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court |
| appointed fiduciary by that fiduciary) |
| Ailton De Souza |
| (Typed or printed name of person signing) |
| President |
| (Title of person signing) |