

P10000062974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED  
16 JAN 14 PM 3:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend*

JAN 14 2016

D CUSHING

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Amz Tile Wood Marble inc  
DOCUMENT NUMBER: P10000062974

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ailton De Souza  
Name of Contact Person

4460 Pinebark ave  
Firm/ Company  
Address  
Orlando FL 32811  
City/ State and Zip Code

chalaki@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ailton De Souza at ( 407 ) 4961110  
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:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 2, 2015

AILTON DE SOUZA  
4460 PINEBARK AVE  
ORLANDO, FL 32811

SUBJECT: AMZ TILE WOOD & MARBLE INC  
Ref. Number: P10000062974

We have received your document for AMZ TILE WOOD & 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 date of adoption of each amendment must be included in the document.

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 215A00025188



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 22, 2015

AILTON DE SOUZA  
4460 PINEBARK AVE  
ORLANDO, FL 32811

SUBJECT: AMZ TILE WOOD & MARBLE INC  
Ref. Number: P10000062974

We have received your document for AMZ TILE WOOD & 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):

I am sorry but I completely overlooked the fact that you did not sign the application. Also the title you listed for the officer (TEMP) is not an acceptable title. Please see the attached list of acceptable titles.

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 515A00026797

16 JAN 14 AM 11:24

RECEIVED

Articles of Amendment  
to  
Articles of Incorporation  
of

Amz Tile Wood Marble inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000062974

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** 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**)

**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

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

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TALLAHASSEE, FL

**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.

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5 DEC 21 AM 10:49

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                      PT      John Doe  
  
X Remove                      V      Mike Jones  
  
X Add                              SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- 1) ☐ Change  
☒ Add  
☒ Remove

~~SC~~ Marcello Lara 4460 Pinebark Ave  
Orlando FL 32811

- 2) ☐ Change  
☒ Add  
☐ Remove

~~TR~~ Maisha Ortiz 13693 Golden Russet Dr  
Winter Garden, FL  
34787

- 3) ☐ Change  
☐ Add  
☐ Remove

- 4) ☐ Change  
☐ Add  
☐ Remove

- 5) ☐ Change  
☐ Add  
☐ Remove

- 6) ☐ Change  
☐ Add  
☐ Remove

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach *additional sheets, if necessary*). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**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)

[illegible]

The date of each amendment(s) adoption: 11/11/15, if other than the date this document was signed.

Effective date if applicable: 11/11/15

(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 not be listed as the document's effective date on the Department of State's records.

**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)

☐ 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 11/11/15

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)

Manager

(Title of person signing)

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TALLAHASSEE, FLORIDA