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## COR AMND/RESTATE/CORRECT OR O/D RESIGN HARMONIA TILE & STONE INC

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Corporate Filing Menu

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TO: Amendment Section

## **COVER LETTER**

Division of Corporations					
NAME OF CORPO	RATION: HARMONIA TIL	E & STONE INC			
	BER: P11000026305				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	JEFERSON PINTO				
		Name of Contact Person	1		
	Firm/ Company				
	8852 POE DR				
		Address			
	TAMPA FL 33615				
		City/ State and Zip Code	2		
HAR	MONIATILE@HOTMAIL.C	OM	,		
		sed for future annual report	notification)		
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For further informatio	n concerning this matter, pleas	se call:			
JEFERSON PINTO		at ( <u>813</u>	446-2830		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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 Amendment Section		Amend	Address ment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tall	ahassee, FL 32314	2661 F.	xecutive Center Circle		

## Articles of Amendment to Articles of Incorporation of

HARMONIA TILE & STONE INC	
(Name of Corporation as currently P11000026305	filed with the Florida Dept. of State)
	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Fits Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "I	o". A professional corangation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	- 18 8 - 18 T
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	THE TOTAL PROPERTY OF THE PARTY
D. If amonding the registered agent and/or registered office address:  new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	i address)
New Registered Office Address:(0	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby occupt the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.

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, Solly 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: XChange	<u>PT</u>	John Doc				
-						
X Remove	<u>v</u>	Mike Jones				
X Add	<u>ŝv</u>	<u>Sally Smith</u>				
Type of Action (Check One)	Title	<u>Name</u>	Address			
I) X Change	VP	PINTO, JEFERSON	8852 POE DR			
^dd		·	TAMPA FL 33615			
Remove						
2) Change	D	MARINS DE OLIVEIRA PINTO,	8852 POE DR			
X Add		HALLECK LUCAS	TAMPA FL 33615			
Remove						
3 ) Change						
Add						
Remove						
4) Change			_			
Add						
Rcmove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

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f an amendment prov provisions for implei (if not applicable)	menting the ame	iange, reclassifica ndment if not cos	tion, or cancellation tained in the amor	in of issued share: (Iment itself:	7
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The date of each amendment(s) adopti	ion:	, if other than the
date this document was signed.	·	
Effective date if applicable:		
<u></u>	(no more than 90 days, after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departs	does not meet the applicable statutory filing requirements, this date will ment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici-	by the shareholders. The number of votes east for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes east for t	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	1 by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
05/07/2018		
Dated		
s:		
Signature /	for, president or other officer - if directors or officers have not been	_
Flicted 6	y an incorporator - if in the hands of a receiver, trustee, or other court	
Impointed (	fiduciary by that fiduciary)	
JEF	FERSON PINTO	
	(Typed or printed name of person signing)	<del>- · · · · · · · · · · · · · · · · · · ·</del>
VP		
<del></del>	(Title of person signing)	