Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Corporate Filing Menu

Help

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#### COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: C.A.S MARBLE	& GRANITE, INC
DOCUMENT NUMBER: P11000048162	
The enclosed Articles of Amendment and fee are so	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
CARLOS A DA SILVA	
C.A.S MARBLE & GRANT	Name of Contact Person ITE, INC.
5322 NW 55TH TERRACE	Firm/ Company
COCONUT CREEK, FL 330	Address
	City/ State and Zip Code
YOURTAX@THESMARTTAX.C	ом
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	se call:
FERNANDA LOLA	at (954 782 3610
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 & Certificate of Status	Certified Copy (Additional copy is enclosed)  Cathorian Fee & Certificate of Status Certified Copy (Additional Copy 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

([[ H16 0000914493]])

#### Articles of Amendment to Articles of Incorporation of

16 MAY 13' AM 9: 22

SECRETARY OF STATE

C.A.S MARBLE & GRANITE, INC. TALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) P11000048162 (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: 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) 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 11 11 11 11 11 (Florida street address) New Registered Office Address: Florida<sub>.</sub> (City) (Zip Code)

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Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

New Registered Agent's Signature, if changing Registered Agent:

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address of each Officer and/or Director being added:	iter the title and name of each officer/director being removed and title, name, and	If amending the Officers and/or Directors, enter the tit
Training of their dillery mission Dillery peling hadden	; added:	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>	Name		Address
1) Change	VP	NATALLA —	A LAHUD	5322 NW 55TH TERRACE
X Add				COCONUT CREEK, FL 33073
Remove			The second secon	
2) Change				
Add	•		a Marin Balanti	
Remove				
3) Change				
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Remove		,		•
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The date of each amendment(s)	adoption:, if other than	ı the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.	s the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	***	
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
04/08/20 Dated	16	
Signature X 4	and the same of th	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	CARLOS A DA SILVA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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