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HM) JUN 12 2017

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ELEGANT MAR	BLE & GRANITE DESIG	N CORP
	00059667		
The enclosed Articles of Amenda	nent and fee are su	bmitted for filing.	
Please return all correspondence of	oncerning this ma	itter to the following:	
MICHEL S	SILVERIO		
		Name of Contact Perso	n
ELEGANT	MARBLE & GF	RANITE DESIGN CORP	
		Firm/ Company	
1025 HAR	BOR LAKE DRI	• •	
		Address	
SAFETY I	HARBOR,FL 346	95	
		City/ State and Zip Cod	e
SUNCREST_IN	C@YAHOO.COM	Л	
E-mai	address: (to be us	sed for future annual report	notification)
For further information concerning	g this matter, pleas		,
MICHEL SILVERIO		at (813	786-7399
Name of Contact P	erson	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	ing amount made	payable to the Florida Depa	ertment of State:
_	75 Filing Fee & ficate 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 Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation 17 JUN -5 AU 10: 32

ELEGANT MARBLE & GRANITE DESIGN CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P11000059667 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amend its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevial "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain 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)	(Document Number of Corporation (if known) to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s s of Incorporation: ending name, enter the new name of the corporation: The new st be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the artered." "professional association," or the abbreviation "P.A." new principal office address, if applicable: In office address MUST BE A STREET ADDRESS) The new mailing address, if applicable: Ing address MAY BE A POST OFFICE BOX) Sending the registered agent and/or registered office address in Florida, enter the name of the egistered agent and/or the new registered office address: John of New Registered Agent	P11000059667 (Document Number of Coursuant to the provisions of section 607.1006, Florida Statutes, this Florida Statutes of Incorporation: (A. If amending name, enter the new name of the corporation: (Document Number of Course of Co	Corporation (if known) Forida Profit Corporation adopts the following amendment
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	egistered agent and/or the new registered of fice address: Vame of New Registered Agent		
	egistered agent and/or the new registered of fice address: Vame of New Registered Agent		
 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 of fice address:). If amending the registered agent and/or registered office address new registered agent and/or the new registered of fice address:	s in Florida, enter the name of the
Name of New Registered Agent	(Flowidg great address)	Name of New Registered Agent	
(Florida street address)	(r tortuu street daaress)	(rioriaa street	adaress)
New Registered Office Address: , Florida (City) (Zip Code)	lew Registered Office Address:, Florida,		, Florida

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>	Name	<u>Addres</u> s
1) Change	S	JOSE L HECHAVARRIA-DOMENI	10103 HICKORY HOLLOW CT
X Add			TAMPA,FL 33615
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
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f an amendment provides for an exchaprovisions for implementing the amer	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

	05-31-2017	
The date of each amendment		, if other than the
date this document was signed		
Effective date if applicable:	06-01-2017	
Effective date if applicable.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ad 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)	
action was not required. The amendment(s) was/wer	re adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
action was not required.		
05-31 Dated	-2017	
Signature		
(B se	y director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	MICHEL SILVERIO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	