

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H13000149876 3)))



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Division of Corporations

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From:

Account Name : FASTKIT CORP Account Number : J20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN J & S TILE AND MARBLE OF MIAMI, CORP.

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July 3, 2013

FLORIDA DEPARTMENT OF STATE

J & S TILE AND MARBLE OF MIAMI, CORP.

800 NE 12TH AVE APT. G232 HOMESTRAD, FL 33030

SUBJECT: J & S TILE AND MARBLE OF MIAMI, CORP.

REF: P12000033976

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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Rebekah White Regulatory Specialist II FAX Aud. #: H13000149876 Letter Number: 013A00016494

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FULL AMPLESSEE FLORIDA

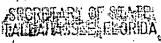
From:

07/01/2013 16:02 #102 P.003/08

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18 JUL -3 PM 3: 53

Articles of Amendment to Articles of Incorporation



& S Tile and Marble of Miam	of si,Corp,		, %
(Name of Corporation as current		pt. of State)	
212000033976			
(Document Number	r of Corporation (if known)		
ursuant to the provisions of section 607.1006, Flo 8 Articles of Incorporation:	orida Statutes, this <i>Florida P</i>	rofit Corporation adopts the	following amendment
If amending name, enter the new name of the	e corporation:		
ame must be distinguishable and contain the v Corp.," "Inc" or Co.," or the designation "Co ord "chartered," "professional association," or t	orp." "Inc." or "Co". A p	nany." or "incorporated" c professional corporation num	The new or the abbreviation the must contain the
Enter new principal office address, if applica rincipal office address <u>MUST BE A STREET A</u>	able:		
. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		
If amending the registered agent and/or register	stered office address in Flo ed office address:	rids, enter the name of the	
Name of New Registered Agent			
	(Plorido street address,		
New Registered Office Address:		, Florida	
	(City)	(Zip C	ode)
ew Registered Agent's Signature, if changing R hereby accept the appointment as registered agen	leristered Agent: 1. I am familiar with and ac	Except the obligations of the pe	Osition
Signature of	New Registered Agent if ch	analna	

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 = Prasident; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trussee: C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Pinancial 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 Doo	
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 ,	<u>VP</u>	Jasiel Moya-Vendrell	800 NE 12 Ave
X_ Add			Unit G232
Remove			Homestead, Fl 33030
2) Change		_	
Add			
Remove			
3) Change	* * * · · · · · · · · · · · · · · · · ·		
Add			
Remove			
4)Change			
Add			
Remove			
5)Change			
\\\dd			, , , , , , , , , , , , , , , , , , ,
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change	····		
Add			- · · · · · · · · · · · · · · · · · · ·
Remove			A. UMPALL

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	ndment provide	es for an exchainting the amend	nge, reclassifica Iment if not co	ation, or cancell otherwise in the a	ation of issued si mendment itself;	nares.
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f an amei provision (if no	is for implement in applicable, inc					*·····································
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if an amei provision (if no	is for implement	17/1				

From:

The date of each amendment(s) a	doption: July 1 2013
Effective date if applicable: Jt	ıly 1 2013
Witechar aute W abbitranis.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of voics cast for the amendment(s) ufficient for approval.
	proved by the sharcholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voling group)
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated July 1	2013
Signature	Margares
selecti	director, president offother officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Obed Moya-Campos
	(Typed or printed name of person signing)
	President
	(Title of person signing)