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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ROBERTO BATERA TILE INSTALLATIONS INC.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	•		
NAME OF CORPORATION:	ROBERTO	BATERA TILE INSTALI	ATIONS INC.
DOCUMENT NUMBER:	P1200008	19963	
The enclosed Articles of Amenda	nent and fee are su	ibmitted for filing.	
Please return all correspondence of	concerning this ma	itter to the following:	
	JOSE	R DASILVA	
	R	Name of Contact Perso OBERTO BATERA TILE	<del>-</del>
		Firm/ Company	
	52:	20 harborside dr	
	7	Address	
	· · · · · · · · · · · · · · · · · · ·	AMPA, FL 33615  City/ State and Zip Cod	e
	RDASILVA@	DLIBERTYTAX.COM	•
E-mai		sed for future annual report	notification)
For further information concerning		se call: at ( 813	) 919-9244
Name of Contact I	erson		de & Daytime Telephone Number
Enclosed is a check for the follow	ring amount made	payable to the Florida Depa	ertment of State:
	75 Filing Fee & ifficate 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 Addre Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle

## Articles of Amendment to Articles of Incorporation

Acusta of Inco	orporation
•	A TILE INSTALLATIONS INC.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P12000089963	····
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida 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	%". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	7 7 7
	S
C. Enter new mailing address, if applicable;	アグ co
(Mailing address MAY BE A POST OFFICE BOX)	
•	D <sub>m</sub> #
* · · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered office addre	The Three transfers of the same of the sam
new registered agent and/or the new registered office address:	is in clorida, enter the name of the
Name of New Revistered Agent	
(Florida stree	et address)
New Registered Office Address:	, Florida
	City) (Zip Code)
	•
N-D	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position
· · · · · · · · · · · · · · · · · · ·	was accept the conguerous of the position
Signature of New Reg	gistered 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>5V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s .
1) Change	VP	matthew scheper	5220 harborside dr
Add			tampa, Fl. 33615
X Remove			
2) Change	<del></del>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		•	<del> </del>
Remove	<u>.</u>		
5) Change			•
Add			,
Remove			<del></del>
6) Change			
Add			
Remove			

E. If amending or adding add	itional Articles, ent	ter change(s) her	<u>:</u> :		
· (Attach additional sheets, if r	ecessary). (Be sp	ecific)			
***	•		**************************************		
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F. If an amendment provides provisions for implementi (if not applicable, indic	ng the amendment	classification, or if not contained	cancellation of n the amendme	issued shares, at itself:	
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, , <b>, , , , , , , , , , , , , , , , , </b>					
			<b>▼</b> /**•		

The date of each amendment(s) adoption:	, if other than 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 block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
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 12/21/2015	
Signature X Long factute da Milion	
(By solirector, 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)	
Jose R Dasilva	
(Typed or printed name of person signing)	
President	
(Title of person signing)	