P1300000/959

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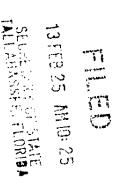
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COVER LETTER

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TO: Amendment Section Division of Corporations

1.

NAME OF CORPORATION: J L MARBLES AND TILES SVCE INC DOCUMENT NUMBER: P13000001959
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MONICA DE LOS RIOS
Name of Contact Person
GMMA CONSULTING SERVICES INC
Firm/ Company
2078 FUTANA WAY
Address
WELLINGTON, FL 33414
City/ State and Zip Code
MONICDELOSRIOS@AOL.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:

MONICA DE	LOS RIOS	at (954	_{_)} 2880223
Name of	Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made [payable to the Florida Depa	ertment of State:
■ \$35 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 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

Articles of Amendment to Articles of Incorporation of

FILED 13 FFR 25 WIG

J L MARBLES AND TILES SVCE INC

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

P13000001959

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SECRETORY OF STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

QUALITY MAY	ble Flours	INC		
must be distinguishable and con p.," "Inc.," or Co.," or the design "chartered," "professional associa	ation "Corp," "Inc." or "C	o". A profession	r "incorporated al corporation	l" or the ab name must co
nter new principal office address, pipal office address <u>MUST BE A S</u>				
tou now motting address if appli	inabla.			
nter new mailing address, if appl Mailing address <u>MAY BE A POST</u>				
failing address MAY BE A POST amending the registered agent an	<i>OFFICE BOX</i>) id/or registered office addro	ss in Florida, ent	er the name of	the
failing address MAY BE A POST smending the registered agent and we registered agent and/or the new	<i>OFFICE BOX</i>) id/or registered office addro		er the name of	the
tailing address MAY BE A POST amending the registered agent an	office BOX) ad/or registered office address: MONICA DE L	OS RIOS	er the name of	the
nailing address MAY BE A POST amending the registered agent and a registered agent agent agent and a registered agent agent agent agent agent agent agent agent	OFFICE BOX) ad/or registered office addre w registered office address:	OS RIOS WAY	er the name of	the
failing address MAY BE A POST amending the registered agent and we registered agent and/or the new	ad/or registered office address: We registered office address: MONICA DE L. 2078 FUTANA (Florida stre	OS RIOS WAY	er the name of	

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally St	mith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
I)Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add				
Remove				
A) Charac				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

ttach <i>add</i>	g or adding additional A itional sheets, if necessary	e). (Be specific	:)		
					
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			<u> </u>		
an amen	dment provides for an ex for implementing the a	xchange, reclass	ification, or canc	ellation of issued sl	iares,
(if not	applicable, indicate N/A))	t contained in the	amenument usen.	
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The date of each amendment(s) a	Adoption: JANUARY 22, 2013
Effective date if applicable:	ANUARY 22, 2013
	(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 votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cast	t for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	lopted by the board of directors without shareholder action and shareholder lopted by the incorporators without shareholder action and shareholder
Dated	120/13
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	JOSE LUCAS
	(Typed or printed name of person signing)
	President
	(Title of person signing)