P130005599

(Re	equestor's Name))		
(Ac	ddress)			
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	P1300075	ID MARBLE RES	TORATION INC.	
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.		
Please return all corres	spondence concerning this mat	ter to the following:		
	MICHELLY PA	SSOS		
	CAMPANA GR	Name of Contact Person	1	
	9260 SW 61ST	Firm/ Company WAY # C		
	BOCA RATON	Address , FL 33428		
		City/ State and Zip Code	e	
mid	chelly@campar			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	1 concerning this matter, pleas	e call:		
Michelly Pa	ISSOS	_{at (} 754	,367-1050	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	ertment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fec & 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		Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment

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Articles of Incorporation of

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MS DIAMOND MARBLE RESTORATION AND TARY OF STATES

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

P13000075599

(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:

rp.," "Inc.," or Co.," or the designation ' d "chartered," "professional association," o	'Corp," "Inc," or "Co". A	professional corp	orporated" or the abb poration name must co
Enter new principal office address, if applincipal office address <u>MUST BE A STREET</u>			
Enter new mailing address, if applicable:	***		
	<u>E BOX</u>)		
Mailing address MAY BE A POST OFFIC f amending the registered agent and/or re new registered agent and/or the new register	gistered office address in F tered office address:		name of the
Mailing address <u>MAY BE A POST OFFIC</u> f amending the registered agent and/or re	gistered office address in F tered office address:		name of the
(Mailing address MAY BE A POST OFFIC If amending the registered agent and/or renew registered agent and/or the new registered	egistered office address in F tered office address: (Florida street addre	ss)	name of the

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>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach addition	r adding additional nal sheets, if necessar	ry). (Be specifi	ic)		
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<u> </u>					
	ent provides for an	avahanga mada	naification over	madlation of ican	d shows
rovisions for	r implementing the	amendment if n	ot contained in	the amendment its	self:
(if not app	plicable, indicate N/A	4)			
					· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adop	tion: 10/09/2013	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	yed by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
	the amendment(s) was/were sufficient for approval	
by	(voting group)	
·	(voting group)	
action was not required.	ed by the board of directors without shareholder action and shareholder ed by the incorporators without shareholder action and shareholder	
action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated_10/09/2013	3	
Signature		
(By a directed, by	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
S	TENIO E. SOUZA	
_	(Typed or printed name of person signing)	
Pi	RESIDENT	
	(Title of person signing)	