P14000023752

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SECRETARY OF STATE TALLAHASSEE, FLORID!

APPROVID



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	MAR	RIN TILE CO	ORP
DOCUMENT NUMBER:	P14	000023752	
The enclosed Articles of Amendmen	t and fee are subn	nitted for filing.	
Please return all correspondence cond	cerning this matte	r to the following:	
	MANU	IEL MARIN	
		(Name of Contact Perso	n)
	MAR	IN TILE CO	ORP
		(Firm/ Company)	
95 (GLEN R	OYAL PKV	VY
		(Address)	
MI	AMI, FL	ORIDA 33	125
 		(City/ State and Zip Cod	e)
marintile(
	•	for future annual report	notification)
For further information concerning th	-		
MANUEL MARIN	1	a _{at (} 305	323-9449
(Name of Contact Per	son)		ode & Daytime Telephone Number)
Enclosed is a check for the following	amount made pay	yable to the Florida Dep	artment of State:
	75 Filing Fee & ificate 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			Address
			on of Corporations
P.O. Box 6327		Clifton	n Building
Amendment Section Division of Corporations		Amen Divisi Cliftor	dment Section on of Corporations

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

MARIN TILE CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P14000023752

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new na	me of the corporation:	
		The new
name must be distinguishable and contain "Company" or "Co." may not be used in	the word "corporation" or "incorporated" or the abbre the name.	
B. Enter new principal office address, i		
		
C. Enter new mailing address, if applie		
<u> </u>		
D. If amending the registered agent and new registered agent and/or the new	d/or registered office address in Florida, enter the nan v registered office address:	ne of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nanging Registered Agent: ered agent. I am familiar with and accept the obligation.	s of the position. TALLAHA
	Signature of New Registered Agent, if changing	ARY SSEE
	Page 1 of 4	·

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 Cha X Ren X Add	nge nove	<u>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of (Check	f Action One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>X</u>	_Change	<u>S</u>	JAVIER A GALC	1529 SW 4 ST
	_ Add			MIAMI , FL 33135
	_ Remove			
2)	_ Change			
	_ Add			
	_ Remove			
3)	_ Change			
	_ Add			
	_ Remove			
4)	_ Change	···	 	
	_ Add			
-	_ Remove			
5)	_ Change		-	
	_ Add			
	_ Remove			
6)	_ Change			
	_ Add			
	Remove			

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	

<u></u>		
·····	The second secon	
		_

The	date of each amendment	(s) adoption:08/10/2014	, if other than the
	date this document was signed. Effective date if applicable: 08/10/2014		
		(no more than 90 days after amendment file date)	
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	Dated 08	/10/2014	
	Signature XL	famel Marin	
	have n	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	MARII	N TILE CORP	
	PRES	(Typed or printed name of person signing) IDENT	
		(Title of person signing)	