P14000070721

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PRO TILE HOME	REMODELING, INC	*****
DOCUMENT NUMBER: P14000070721	· · · · · · · · · · · · · · · · · · ·	151.
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
NICK WILMOT		
	Name of Contact Persor	<u> </u>
DEBBIES ACCOUNTING S	SERVICE INC	
-	Firm/ Company	
3575 SOUTHSIDE BLVD	• •	
	Address	
JACKSONVILLE, FL 32216	õ	
	City/ State and Zip Code	;
NICK@DEBBIESACCOUNTING	SERVICE.COM	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, please	se call:	
NICK WILMOT	at (904	733-4547
Name of Contact Person	Area Co	_)
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\times \text{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	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PRO TILE HOME REMODELING INC.

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P14000070721	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable:	"Co". A professional corporation name must contain the
(Principal office address MUST BE A STREET ADDRESS)	超马巴
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	21 Pit 2: 52
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida :	street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia	nt:

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>	<u>Addres</u> s
1) Change	D	VOKRRI, NDUE	7200 POWERS AVE UNIT 257
X Add			JACKSONVILLE, FL 32217
Remove			
2) Change	D	PALAJ, FRANC	5723 ALAMOSA CIR
X Add			JACKSONVILLE, FL 32258
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			,

Attach additional sheets, if necessary).	(Be specific)		
, ., ., ., ., ., ., ., ., ., ., ., .,	<u> </u>		
	, <u></u>		
			
			<u></u>
			
			<u>-</u>
	10.00		
f an amendment provides for an excl	anga valassification or so	weallation of issued shares	
provisions for implementing the ame	ndment if not contained in the	he amendment itself:	
(if not applicable, indicate N/A)			
			
		-	

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)	
(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 with document's effective date on the Department of State's records.	ll 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.	
10/18/16 Dated	
Signature Denis Pula; (By a director, 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)	
DENIS PALAJ	
(Typed or printed name of person signing)	.
PRESIDENT	
(Title of person signing)	