## P15000 84 127

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## **COVER LETTER**

: TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MMA MARB	LE AND GRANITE, INC
DOCUMENT NUMBER: P15000084127	
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning th	s matter to the following:
FERNANDO SILVA	
SKYTRUST ENTERPR	Name of Contact Person ISE, LLC
3601 N DIXIE HWY #1	Firm/ Company
BOCA RATON, FL 33-	Address 31
<del></del>	City/ State and Zip Code
FERNANDO@SKYTRUSTE	I and the second
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	 please call: 
FERNANDO SILVA	at (561 ) 463-2557  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount n	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
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

MMA MARBLE AND GRANITE, INC

	II .
(Name of C	Corporation as currently filed with the Florida Dept. of State)
P15000084127	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to
A. If amending name, enter the new nam	e of the corporation:
	The new
	n the word "corporation," "company," or "incorporated" or the abbreviation ion "Corp," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if a	applicable:
(Principal office address <u>MUST BE A STR</u>	
new registered agent and/or the new r	or registered office address in Florida, enter the name of the
Name of New Registered Agent	<u> </u>
2.	430 NW 16TH LN # C
	(Florida street address)
New Registered Office Address:	OMPANO BEACH . Florida . Florida
New Registerea Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if cha-	 nging Registered Agent:
	ed agent. I am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing

address of each Officer: (Attach additional sheets, Please note the officer/dir P = President; V = Vice of Executive Officer; CFO held, President, Treasure, Changes should be noted	and/or Di if necesso rector title President; = Chief F r, Directo in the follows ves the co	rector bein  (iv)  (by the first  T = Treasu  (inancial Off  r would be flowing man  (rporation,	g added:  letter of the office title:  letter of the office title:  letter of the office title:  letter of the officer/D = Director; TR=  licer. If an officer/director holds more  TID.  letter Currently John Doe is listed as the  sally Smith is named the V and S. These  as an Add.	r/director being removed and title, name, and  Trustee; C = Chairman or Clerk; CEO = Chief  than one title, list the first letter of each office  e PST and Mike Jones is listed as the V. There is e should be noted as John Doe, PT as a Change,
X Add	<u>sv</u>	Sally Smit		
Type of Action (Check One)	<u>Title</u>	<u>N</u>	ame 	<u>Addres</u> s
1) Change	MNG	<u> </u>	ELISSA M. OLIVEIRA	3410 W HIELSBORO BLVD #201
Add				COCONUT CREEK, FL 33073
X Remove				
2) Change	VP	Z_	ATALIA OLIVEIRA	2430 NW 16TH LN #C
X Add				POMPANO BEACH, FL 33064
Remove				
3 ) Change		_ [		
Add				
Remove				
4) Change	-	-    -		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		-   		

\_\_ Remove

. If amending or adding additional Articles, enter change(s) here:			
(Attach additional sheets, if necessary).	(Be specific) 		
	}		
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	11		
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	<u> </u>		
	l in an annual later of learned above		
. If an amendment provides for an excu	lange, reclassification, or cancellation of issued shares.  Indirient if not contained in the amendment itself:		
(if not applicable, indicate N/A)			
ty min applicable, marcale rolly			
<u> </u>	<u> </u>		
	<u>                                     </u>		

•	
The date of each amendment(s) adoption: _ date this document was signed.	l
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (C	 HECK ONE) 
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	
☐ The amendment(s) was/were approved by t must be separately provided for each voting	[] the shareholders through voting groups. The following statement [] group entitled to vote separately on the amendment(s): []
"The number of votes cast for the am	 endment(s) was/were sufficient for approval 
by	ning group)
☐ The amendment(s) was/were adopted by th action was not required.	board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by th action was not required.	incorporators without shareholder action and shareholder
08/30/2017 Dated	
Signature MARCA	Sident or other officer – if directors or officers have not been
selected, by an in	esident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court ry by that fiduciary)
MARCO	 NDE OLIVEIRA 
	(Typed or printed name of person signing)
PRESIDE	NT 
	(Title of person signing)