11/15/2018 11:33AM FAX 11/7/2018



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From:

; DDS TAMPA TAX SERVICE Account Name

Account Number : I20140000115 Phone

: (813)882-8426

Fax Number

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: AIVGELAJMACHADO @ HOTMAIL.COM

## COR AMND/RESTATE/CORRECT OR O/D RESIGN MATEUS TILE CORP

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## COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: MATEUS TILE CO	DRP
DOCUMENT NUMBER: P15000088113	·
The enclosed Articles of Amendment and fee are sub	omitted for filling.
Please return all correspondence concerning this man	ter to the following:
MACHADO, MAURO M	
MATEUS TILE CORP	Name of Confact Person
	Firm/ Company
US77 MALLORY SQUARE	• •
	Address
TAMPA, FL 33635	
	City/ State and Zip Code
angelajmachado@hotmail.com	
* · -	ed for future unnual report notification)
is-mail address. (to be use	ed for future annual report notification)
For further information concerning this matter, please	codf:
MAURO MACHADO	Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
\$35 Filing Fee U\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee 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 Articles of Incorporation υſ

(8)	
	filed with the Florida Dept. of Stage)
P1500008313	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Striptes, this $Fl$ its Articles of Incorporation:	Inrida Profit Corporation adopts the following amendments
A. If amending name, enser the new name of the corporation:	
name must be distinguishable and contain the word "corporation,"	The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coward "chartered," "professional association," or the abbreviation "P.,	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	·
C. Enter new mailing address, if applicable: (Mailing uddress MAY BE A POST OFFICE BOX)	
	•
	<del></del>
	•
D. If amending the registered agent and/or registered office address; new registered agent and/or the new registered office address;	ns in Florida, enter the name of the
Name of New Registered Agent	
(Clarida et est	d add a mill
(Florida street	t address)
New Registered Office Address:	(Zip Code)

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;

 $P = President; V = Vice President; T = Treasmer; S \Rightarrow Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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 10</u>	իո Լիսգ	
X Remove	<u>v</u> <u>M</u>	ike_tones	
<u>X</u> Add	<u>ŞV</u> S <u>a</u>	illy Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		VILCHEZ, JAVIER	11577 MALLORY SQUARE DR
			#304
X Remove			TAMPA, FL 33635
2)Change	<u></u>		
Remove			
3 ) Change		<del></del>	<del>-</del>
Add			·
Kemove			
4) Change			
Add			
Remove			
5) Change			
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6) Change	•	<del></del>	
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The date of each amendment(s) date this document was signed.	adoption:	· <del></del> ·	· · · · · · · · · · · · · · · · · · ·	, if other than the
Effective date if applicable:				
	(no mi	ire than 90 days ofter ame	ndment file date)	<del>_</del>
Note: If the date inserted in this document's effective date on the [	black does not meet department of Sinte's r	the applicable statutory firecords.	ling requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK O	NE)		
☐ The amendment(s) was/were as by the shareholders was/were :	topical by the sharehol sufficient for approval.	ders. The number of votes	sicust for the amendment(s)	
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11/07/2	810			
Dated	<u></u>			
Signature M	Muster Mas	to ma	(hada	
(By a select	director, president or o		er officers have not been tyer, trustee, or other court	_
	MAURO M MACH	łado		
	(Typed o	r printed name of person s	igning)	<del></del>
	PRESIDENT			
		(Tide of person signing	<u>,                                      </u>	<u>-</u>