P16 0000 52021

(Reque	estor's Name)	·
(Addre	ess)	
(Addre	ess)	
(City/S	itate/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nam	ne)
(Docum	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	



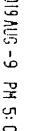


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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: DAVY TILE & M	ARBLE INSTALLATION	INC
DOCUMENT NUM	1BER: P16000052021		
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	NIVALDO RAIMUNDO		
		Name of Contact Person	1 .
	DAVY TILE & MARBLE IN	NSTALLATION INC	
		Firm/ Company	
	3520 CHESHIRE SQ A		
		Address	
	SARASOTA, FL 34237		
		City/ State and Zip Cod	e
brill	liantaxservices@gmail.com		./
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	ion concerning this matter, pleas		
LECIO DE PAULA		at (8158886
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & 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)
Ar Di P.e	ailing Address mendment Section vision of Corporations O. Box 6327 illahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

n	AVV TH	T &	MARRI	FINCT	A I I	$\Delta TIONI$	MC

(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P16000052021	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corpora" (Corp., ""Inc.," or Co.," or the designation "Corp.," "Inc.," o word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name must contain the
	70 - 20 20 - 20
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Frincipal office address MOST BE A STREET ADDRESS)	
	Section 1
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u> </u>
	· H · ·
D. If amending the registered agent and/or registered office a	ddress in Florida, enter the name of the
new registered agent and/or the new registered office addr	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famili	
т петету иссера те арронитет из гезылегей изет. Тит јати	ы жин или иссерстве отідиноня од те ромнон.
Signature of Ne	w Registered Agent, if changing

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>	Name	<u>Addres</u> s
1)Change	VP	DANILLO MARTINS	3520 CHESHIRE SQ A
Add			SARASOTA, FL 34237
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			***************************************
Remove			
4) Change			
Add			-11-11-11
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

The date of each amendment(s) adoption:, if other to date this document was signed.	han the
Effective date if applicable: (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 will not be listed document's effective date on the Department of State's records.	l 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)	
(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.	
Dated 08/06/2019	
Signature Minalto Baine de	
(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)	
NIVALDO A RAIMUNDO	
(Typed or printed name of person signing)	
PDS	
(Title of person signing)	