P17000017926

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GP COPING & T	TILE INC				
DOCUMENT NUMBER: P17000017926					
The enclosed Articles of Amendment and fee are s	submitted for filing.				
Please return all correspondence concerning this m	atter to the following:				
PAULO GOMES					
	Name of Contact Person	1			
	Firm/ Company				
123 SW 15TH STREET					
**	Address	-			
DEERFIELD BEACH FL 3	3441				
	City/ State and Zip Code	e			
paulo_acc@outlook.com		4			
	sed for future annual report	notification)			
For further information concerning this matter, plea	se call:				
Paulo Gomes	at (818-2991			
Name of Contact Person	Area Co	de & Daytime Telephone Number			
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

GP COPING & TILE INC

(<u>Name</u>	of Corporation as currently	y filed with the Florida Dept. of State)	
P17000017926			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
	nation "Corp," "Inc," or "(n," "company," or "incorporated" or the Co". A professional corporation name mus. P.A."	
B. Enter new principal office address,	if applicable:		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	بر <u>جن</u> م <u>جن</u>	g 🛋
			T T T
			28 =
C. Enter new mailing address, if appl		SET	
(Mailing address <u>MAY BE A POST</u>	OFFICE BUX)		
		\tag{\frac{1}{2}}	े व
			<u> </u>
D. If amending the registered agent an	nd/or registered office addr	ess in Florida, enter the name of the	•
new registered agent and/or the new			
Name of New Registered Agent	MARCIA PERPETUO		
	10705 ELAND STREET		_
	(Florida stre	eet address)	
New Registered Office Address:	BOCA RATON	. Florida ³³⁴²⁸	
			o Code)
N. 70 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
New Registered Agent's Signature, if c	hanging Registered Agent:	<u>.</u> vith and accept the obligations of the position	
- not vey accept the appointment as regist		min and decept the dongations of the position.	,
	2/1/		
100.	up Jan Im		
/	I Signature of New P.	agistared Agant 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.

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	P	GERALDO PERPETUO	10705 ELAND STREET	
Add			BOCA RATON, FL 33428	
X Remove				
2) X Change	P	MARCIA PERPETUO	10705 ELAND STREET	
Add			BOCA RATON, FL 33428	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Add Remove				
			** / =	
6) Change				
Add				
Remove				

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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, indiment if not contained in the amendment itself:
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/The date of each amondments	. 06/20/2017	10 advan di an di a
The date of each amendment(s) date this document was signed.) adoption:	, if other than the
Effective date if applicable:	•	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amer sufficient for approval.	ndment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and sh	areholder
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	older
06/20/20 Dated	Major Dan Fus	
selec	a director, president or other officer – if directors or officers have neeted, by an incorporator – if in the hands of a receiver, trustee, or ot inted fiduciary by that fiduciary)	
	MARCIA PERPETUO	
	(Typed or printed name of person signing)	-
	PRESIDENT	
•	(Title of person signing)	