## P11000029023

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## **COVER LETTER**

FIELD SECRETARY OF SHAD DIVISION OF CORRORAGEST.

TO: Amendment Section Division of Corporations

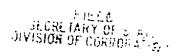
Tallahassee. FL 32314

2010 JUL -9 AM 11: 32

NAME OF CORPO	ORATION: FHP Tile Instal	lation Inc				
	IBER: P17000029023					
The enclosed Article	s of Amendment and fee are	submitted for filing.				
Please return all corr	espondence concerning this n	natter to the following:				
	Fabian Hernandez					
		Name of Contact Person	on			
	FHP Tile Installation Inc					
	Firm/ Company					
	1476 Ranch Dr					
	Address					
	West palm beach, FL, 33415					
		City/ State and Zip Coo	de			
	E-mail address: (to be u	ised for future annual repor	t notification)			
For further informatio	n concerning this matter, plea	se call:				
Fabian Hernandez		561	667-0877			
Name	of Contact Person		ode & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made					
\$35 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



FHP Tile Installation Inc

2818 JUL -9 AM 11: 32

(Nome of Com-	36 Milli 36
P17000029023	ration as currently filed with the Florida Dept. of State)
	cument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of th	e corporation:
name must be distinguishable and contain the "Corp" "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	word "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the the abbreviation "P.A."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	<u>ble:</u> <u>DDRESS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u> )
). If amending the registered agent and/or regis	tered office address in Florida, enter the name of the
new registered agent and/or the new registered	d office address:
Name of New Registered Agent	
	(Florida street address)
M 5	(Florida Sireel adaress)
New Registered Office Address:	(City) , Florida (Zin Coda)
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Rehereby accept the appointment as registered agent.	egistered Agent: I am familiar with and accept the obligations of the position.
Sig	nature of New 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
l) Change	VP	Carlos A Luna	1476 Ranch Dr
XAdd			West Palm Beach, FL, 33415
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			· <del></del>

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an amendment provides for an exchange	, reclassificatio	on, or can	cellation o	<u>f</u> issued sha	res,	
orovisions for implementing the amendme (if not applicable, indicate N/A)	ent if not conta	ined in the	e amendm	ent itself:		
		<del></del> -		<del></del>		
	·· <u></u> ·· ·			·· <u>···</u>		
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The date of each amendment(s) adoption:  date this document was signed.	, if other than the
Effective date if applicable:	<del></del>
(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 document's effective date on the Department of State's records.	ate will 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 by the shareholders was/were sufficient for approval.	(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"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.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
07/03/2018	
Dated	
Signature Man Med marker	
(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 courappointed fiduciary by that fiduciary)	t
FABIAN HELVANDEZ.	
(Typed or printed name of person signing)	<del></del>
PRESIDENT	
(Title of person signing)	