P17000031448

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	PRECISION TILE	EOF JAX INC		
DOCUMENT NUM	D17000031449			
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	DAVID BUSHI			
		Name of Contact Person	n	-
	PRECISION TILE OF JAX	INC		
		Firm/ Company		-
5511 DOVER CREST LN				
		Address		-
JACKSONVILLE, FL 32223				
		City/ State and Zip Cod	e	-
		sed for future annual report	notification)	
For further informati	on concerning this matter, please	se call:		5
DAVID BUSHI		at (600-6605	SE IVIS
Name	of Contact Person		de & Daytime Telephone Numbe	7 30 30
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	7 -3
\$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)	SECNETY BY OF STATE DIVISION OF COMPORATIONS 17 MAY -3 PM 3: 43

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

PRÉCISION THE OF JAX INC.

17000031448	n as currently filed with the Fl		
/Pogumo			
(Docume)	nt Number of Corporation (if kr	nown)	
ursuant to the provisions of section 607.1006, Florida S Articles of Incorporation:	Statutes, this Florida Profit Cor	poration adopts the fol	llowing amendment(s) t
. If amending name, enter the new name of the corr	poration:		,
			The new
Corp.," "Inc.," or Co.," or the designation "Corp.," ord "chartered," "professional association," or the ab Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR	bbreviation "P.A."	nal corporation name	must contain the
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	·		
. If amending the registered agent and/or registered new registered agent and/or the new registered of		ter the name of the	91VIS 17
Name of New Registered Agent			CRETARY
	(Florida street address)		
New Registered Office Address:		, Florida	<u> </u>
	(City)		(Zip Code) 5-

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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>	<u>Name</u>	<u>Addres</u> s
1) Change	sv	DAVID BUSHI	5511 DOVER CREST LN
X Add			JACKSONVILLE, FL 32223
Remove			
2) Change	· · · · · · · · · · · · · · · · · · ·		
Add			
Remove			
3) Change			
Add			
Kemove			
4) Change			
Add			
Remove			
5) Change			
Add		7	
Remove			
6) Change			
Add			
Remove			
Kemove			

ttach additional sheets, if necessary).	(Be specific)
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares.
rovisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
an amendment provides for an exch rovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
rovisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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rovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and not contained in the amendment itself:

The date of each amendment(s) adoption	l:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date	?)
Note: If the date inserted in this block document's effective date on the Department	oes not meet the applicable statutory filing requirement of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amfor approval.	endment(s)
	by the shareholders through voting groups. The following group entitled to vote separately on the amendme	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and share	holder
05/01/2017 Dated		
Signature	D	
(By a director, selected, by an	president or other officer – if directors or officers have incorporator – if in the hands of a receiver, trustee, or ciary by that fiduciary)	
PJETE	R ZEFI	
	(Typed or printed name of person signing)	
PRESI	DENT	
	(Title of person signing)	