P17000038051

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DOUBLE I TILE	& REMODELING INC				
DOCUMENT NUMI	BER:					
The enclosed Articles	of Amendment and fee are su	abmitted for filing.				
Please return all corre	spondence concerning this ma	itter to the following:				
	NICHOLAS FANELLA					
		Name of Contact Persor	1			
	N R FANELLA& CO INC					
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company				
	434 TANGLEWOOD DR					
	Address					
	FORT WALTON BEACH F	L 32547				
		City/ State and Zip Code	e			
NFAI	NELLA@COX.NET					
	E-mail address: (to be u.	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call;				
NICHOLAS FANELI	.A	at (\$50 862-71)	31)			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r 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)			
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

DOUBLE T TILE REMODELING INC

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P17000038051	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	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 "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address 	
Name of New Registered Agent	_
Name of New Registered Agent	
(Florida str	vet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar s	

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)	Title	Name	Address
1) Change	VP	ANTHONY J GAROFALO III	26 CASCAVELLAS STREET
A Add			MARY ESTHER FL 32569
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ects, if necessary).	(Be specific)			
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6	ovides for an exci	nange, rectassificat	ion, or cancellatio	n of issued shares,	
f an amendment pr	lomonting the ame	HUMENL II NOL COM	ameu in the amen	ument itsen:	
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment ufficient for approval.	(s)
	proved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	ient
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
☐ The amendment(s) was/were acceptation was not required.	opted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were action was not required.	opted by the incorporators without shareholder action and shareholder	
11/10/201 Dated		
Signature	Totaly In the 17	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	ANTHONY J GAROFALO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	