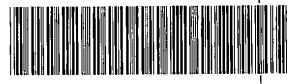
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(Rec	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: \_ E & B TILE AND MARBLE CORP DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **EDWIN DOMINGUEZ** Name of Contact Person E & B TILE AND MARBLE CORP Firm/ Company 19362 SW 119TH CT Address **MIAMI FL 33177** City/ State and Zip Code EDWINSON0992@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 301-5887
Area Code & Daytime Telephone Number EDWIN DOMINGUEZ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

### **Mailing Address**

TO: Amendment Section

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

E & B TILE AND MARBLE CORP

(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000041078	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	forida 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 "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". 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> )	7-0
C. Enter new mailing address, if applicable:	·
(Mailing address MAY BE A POST OFFICE BOX)	
	· · · · · · · · · · · · · · · · · · ·
	3
D. If amending the registered agent and/or registered office address	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stree	( address)
New Registered Office Address:	, Florida
(0	(Zip Code)
	ţ
Non- Designated Agent's Signature if shanging Designated Agent.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the second se	th and accept the obligations of the position.
	11 11 11 11 11 11 11 11 11 11 11 11 11
Signature of New Res	gistered Agent, if changing

address of each Officer Attach additional sheets Please note the officer/di P = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted	and/or I  if neces. rector tit Presiden = Chief er, Direct l in the fo	Director l sary) le by the j t; T= Tre Financias or would bllowing t corporatie	neing added:  first letter of the office title:  casurer; S= Secretary; D= Director; TR=  l Officer. If an officer/director holds more  be PTD.  nanner. Currently John Doe is listed as the  on, Sally Smith is named the V and S. These	Trustee; C = Chairman or Clerk; CEO = Chiefe than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is a should be noted as John Doe, PT as a Change,
X Change	PT	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike J	ones	
X Add	<u>\$V</u>	Sally S	<u>mith</u>	
<u>Cype of Action</u> (Check One)	Title		<u>Name</u>	Address
1) Change	VP		ERNESTO M. DJUANA ALCOLEA	19362 SW 119TH CT
X Add				MIAMI, FL 33177
Remove				
2) Change		_		<u> </u>
Remove				
3) Change		_	-	
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				

\_ Remove

Attach additional sheets, if necessary),	cles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an analysis of issued shares, and an analysis of issued shares of issued shares.
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an analysis of issued shares, and an anal
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and the amendment itself:

The date of each amendment(s)	10-09-201 / adoption:	, if other th
late this document was signed.		]
Effective date if applicable:		
meente date <u>in appreasie</u> .	(no more than 90 days after amendment file date)	j
Note: If the date inserted in this ocument's effective date on the I	block does not meet the applicable statutory filing requirements, this date volepartment of State's records.	vill not be listed
adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	ļ
by	(voting group)	
	(voting group)	1
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
10-09-20	17	
Dated Signature	Ede	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	 !
	EDWIN DOMINGUEZ	ļ
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	<del></del>