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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Jim Pierce Tile Inc	
DOCUMENT NUMBER: <u>P17000063324</u>	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Name of Contact Person Tim Pierce Tile The Firm/ Company 32379 Biennal Street Address Sebienc Fl. 33870 City/ State and Zip Code E-metal address: (to be used for future annual report notification)	+
For further information concerning this matter, please call:	
LAWRWAR PAYNE at (863) 385-6654 Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & 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	
Tim Pierce Tile	the
	filed with the Florida Dept. of State)
P1700006331	24
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.," or the designation "or the abbreviation ". B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20". A professional corporation name must contain the P.A."
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
Name ty New Negatier Canger	
(Florida str	eet address)
V. D. C. LOWE - Change	, Florida
	(City) (Zip Code)
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 I	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 Dog	
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>	Address
1) Change	<u>Q</u>	James m Pierce	4321 Maderia Ave Sebieing, FI.
Add Remove			<u>sebeing</u> 1-1.
2) Change			
Add			
Remove			
Change			
Add Remove			
4) Change			
Add 			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add 1			
Remove			

ttach ada	ng or adding additional Ar ditional sheets, if necessary).	(Be specific)			
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<u> an ame</u>	endment provides for an ex-	change, reclassificat	ion, or cancellation	of issued shares,	
<u>provisio</u>	ns for implementing the an	nendment if not cont	ained in the amend	ment itself:	
(1) 11	ot applicable, indicate N/A)				
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date this document was	s signed.	
Effective date if appli	(no more than 90 days after amendment file date)	
Note: If the date insedocument's effective de	erted in this block does not meet the applicable statutory filing requirements, this date value on the Department of State's records.	will not be listed as the
Adoption of Amendm	nent(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) by the shareholders	was/were adopted by the shareholders. The number of votes east for the amendment(s) is was/were sufficient for approval.	
☐ The amendment(s) must be separately	was/were approved by the shareholders through voting groups. The following statement provided for each voting group entitled to vote separately on the amendment(s):	
"The number	of votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) action was not requ	was/were adopted by the board of directors without shareholder action and shareholder irred.	
The amendment(s) action was not requ	was/were adopted by the incorporators without shareholder action and shareholder aired.	
. Date	ed 8 3 1 17	
Sign	(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 court appointed fiduciary by that fiduciary)	
	TAMES W PIERCE (Typed or printed name of person signing)	
	President	
	(Title of person signing)	
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