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OF

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 19, 2021

JOSE MATOS 6705 S US HWY 1 PORT ST LUCIE, FL 34952

SUBJECT: THE BEST GRANITE AND FIRE PROTECTION CORP.

Ref. Number: P18000077018

We have received your document for THE BEST GRANITE AND FIRE PROTECTION CORP, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

Letter Number: 021A00005824

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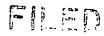
COVER LETTER

TO: Amendment Section Division of Corporations

1517131011 (11 CO	porations		237	; -	500 J: 15
NAME OF CORPO	ORATION: MATOS			_	
	1BER: P18000077018			_	
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	itter to the following:			
	JOSE MATOS	-			
		Name of Contact Person	 		
	MATOS INCOME TAX SE	RVICE			
		Firm/ Company	· · • ,	·	
	6705 S US HWY1		•		
	_	Address	 		
	PORT ST LUCIE FL 34952				
		City/ State and Zip Cod	e		
	j_958@hotmail.com				
	E-mail address: (to be us	sed for future annual report	notification)	-	
For further informati	on concerning this matter, plea	se call:			
JOSE MATOS		at (⁷⁷²	521-5442		
Name of Contact Person		Area Co	de & Daytime Telephone No	umber	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 81	0	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



	2021 MAR 30 AM 9: 02
(Name of Corporation as currently fi	led with the Florida Dept. of State)
P18000077018	SECRETARY OF STATE TALLAMASSES A
(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> ts Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
THE BEST GRANITE & MARMOL CORP	The new
name must be distinguishable and contain the word "corporation," "com "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pr "chartered," "professional association," or the abbreviation "P.A."	pany," or "incorporated" or the abbreviation "Corp.,"
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
). If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	N/A
	address)
iFlorida street a	
iFlorida street a	, Florida

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.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.

Example: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Satly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			11/2/
Add		())] /
Remove		₩ .	/
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	'/
ment provides for an exchange, reclassification	/ n. or cancellation of issued shares.
ment provides for an exchange, reclassification for implementing the amendment if not contain	ned in the amendment itself:
applicable, indicate N/A)	
/	
	
-	
/	

The date of each amendment(s)	idoption:	, 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 document's effective date on the I	block does not meet the applicable statutory filing requirements epartment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amer ufficient for approval.	ndment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	statement (s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
01/23/202 Dated	1	
	15C 1 CODTES	
(By a c selecte	irector, president or other officer – if directors or officers have no d, by an incorporator – if in the hands of a receiver, trustee, or off ted fiduciary by that fiduciary)	ot been ner court
	JOSE L CORTEZ ZACARIAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	