6/8/2020

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ITAX GROUP, LLC Account Number : I20140000115

Phone : (813)882-8426

Fax Number : (813)884-0263

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: FERNANDOZACARKIN & GMAIL. COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN ZACAS TILE INSTALLATION INC

Certificate of Status	0
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Page Count	01
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: ZACAS TILE IN	STAULATION INC			
DOCUMENT N	JMBER: P20000024727				
The enclosed Arti	cles of Amendment and fee are so	ubmitted for filing.			
Please return all e	orrespondence concerning this ma	atter to the following:			
	FERNANDO M ZACARKI	N			
		Name of Contact Perso	on		
	ZACAS TILE INSTALLATION INC				
		Firm/ Company			
	9611 LONG MEADOW DR				
		Address			
	TAMPA, FL 33615				
		City/ State and Zip Coo	le		
	FERNANDOZACARKIN@	GMAIL.COM			
		sed for future annual repor	t notification)		
For further inform	ation concerning this matter, plea		382 0963		
Na	ne of Contact Person	Area Co	382 0963 odc & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made				
S35 Filing Fee	: □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
, I F	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

	ently filed with the Florida Dept. of State)		
P20000024727			
(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	his 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 "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	. A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	9611 LONG MEADOW DR		
(Principal office address MUST BE A STREET ADDRESS)	TAMPA, FL 33615		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9611 LONG MEADOW DR		
	TAMPA, FL 33615		
	E _C , A		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the		
Name of New Registered Agent	SERVE TO		
9611 LONG MEADOW	V DR		
(Floridu	street address)		
New Registered Office Address: TAMPA, FL	Florida 33615		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Age	ent:		
I hereby accept the appointment as registered agent. Jam familio	or with and accept the obligations of the position.		
Signature of New Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (1)	v 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.

X Change	<u> 191</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	SEGRET Address
1) Change	D	VALTER VIEIRA FAGUNDES	9611 LONG MEADOWDR
X Add			TAMPA, FL 33615
Remove			C 8: 8: 6: 6: 6: 6: 6: 6: 6: 6: 6: 6: 6: 6: 6:
2) X Change	P	FERNANDO M ZACARKIN	9611 LONG MEADOW DR
Add			TAMPA, FL 33615
Remove Change			
Add			
Remove			
4) Change			
Add			
5) Change			
Add			
Remove			
δ) Change			
Remove			

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)					
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If an amendment provides for an exch	ange, reclassification	. or concella	tion of issues	1 shaess	용전	Ġ
provisions for implementing the amer	idment if not contain	ed in the am	endment its	elf:) UC.	8/
(if not applicable, indicate N/A)		•"				
P/F						
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The date of each amendment(s) adoption:	if other then 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 does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be fisted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or hoard of directors without shareholder action action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	2028 SEC
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	JUN 16
"The number of votes cast for the amendment(s) was/were sufficient for approval by"	
(voting group)	1 8: 31 STATE LORID
Dated	DM
Signature	
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator \(\frac{1}{16} \) in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
FERNANDO M ZACARKIN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	