## PZ0000055347

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(Ad	dress)	-
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON:POPE	EYE'S TILE FL INC	
DOCUMENT NUMBER:	I	P20000055347	
The enclosed Articles of Am	endment and fee are su	bmitted for filing.	
Please return all corresponde	ence concerning this ma	tter to the following:	
		MARIO E. JUAREZ	
		Name of Contact Persor	
	МВ	FINANCIAL GROUP PA	
<del></del> -		Firm/ Company	
	7370 CG	OLLEGE PARKWAY SUI	TE 301
<del></del>		Address	
	F(	ORT MYERS, FL 33907	
		City/ State and Zip Code	
	MARIC	@MBACCOUNTINGPA.	СОМ
<u>_</u>	E-mail address: (to be us	sed for future annual report	notification)
For further information conc	erning this matter inlea	se call:	
To take morning conc	orning this natter, pied	ec can.	
MARIO E. JUAREZ		at (	938-0065
Name of Con	tact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made	payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee ☐	343.75 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 A Amendme	nt Section	Amend	Address ment Section
Division o P.O. Box 6	f Corporations 5327		n of Corporations entre of Tallahassee
	e, FL 32314		V. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

## POPEYE'S TILE FL INC

<del>-</del>	ida Dept. of State)
0055347	
nber of Corporation (if know	vn)
s, this <i>Florida Profit Corpo</i>	ration adopts the following amendment
on:	
	The new
o". A professional corpo	porated" or the abbreviation "Corp.," ration name must contain the word
N/A	
	p20
	-
N/A	1
<del></del>	
e address in Florida, enter	the name of the
	<u> </u>
N/A	
ida street address)	
and on Certain Long	
(City)	, Florida (Zip Code)
(Oly)	(inj) conty
ulliar with and accept the of	bligations of the position.
New Registered Agent, if ch	anging
3	Q Q
	on:  on," "company," or "incorpo". A professional corpo "P.A."  N/A

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)

Example:

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ALEJANDRO HERNANDEZ REYN	3013 ALAMO DR
Add			IMMOKALEE, FL 34142-US
X Remove 2) Change	VP	ALEJANDRO HERNANDEZ R.	3013 ALAMO DR
Change X Add			IMMOKALEE, FL 34142-US
Remove 3) Change	SEC	ALEJANDRO HERNANDEZ REYN	3013 ALAMO DR
Add			IMMOKALEE, FL 34142-US
X Remove 4) Change	SEC	ALEJANDRO HERNANDEZ R.	3013 ALAMO DR
X Add			IMMOKALEE, FL 34142-US
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	FICERS OF THE CORPORATION, AS STATED ABOVE.
ENDING AND CORRECTI	NG VP AND SECRETARY OFFICER'S LAST NAME.
If an amendment provides fo	or an exchange, reclassification, or cancellation of issued shares.
provisions for implementing	or an exchange, reclassification, or cancellation of issued shares, g the amendment if not contained in the amendment itself:
(if not applicable, indicate	g the amendment if not contained in the amendment itself:
provisions for implementing	g the amendment if not contained in the amendment itself:
(if not applicable, indicate	g the amendment if not contained in the amendment itself:
(if not applicable, indicate	g the amendment if not contained in the amendment itself:
(if not applicable, indicate	g the amendment if not contained in the amendment itself:
(if not applicable, indicate	g the amendment if not contained in the amendment itself:
(if not applicable, indicate	g the amendment if not contained in the amendment itself:
(if not applicable, indicate	g the amendment if not contained in the amendment itself:
(if not applicable, indicate	g the amendment if not contained in the amendment itself:

08-18-2020 The date of each amendment(s) adoption: \_ , if other than the date this document was signed. WHEN APPROVE BY THE DIVISION OF CORORATIONS 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 will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ 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): "The number of votes cast for the amendment(s) was/were sufficient for approval by \_ (voting group) 08-18-2020 Dated By a director, president or other officer – if directors or officers have not been scleeted, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) JENNIFER CARBAJAL (Typed or printed name of person signing) CEOP (Title of person signing)