## P20000089161

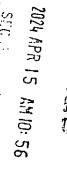
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: PRIME MARBLE	AND TILE RESTORATION	ON CORP		
	JMBER: P20000089161				
	cles of Amendment and fee are su	abmitted for filing.			
Please return all co	orrespondence concerning this ma	atter to the following:			
	GUSTAVO A FLORES ZEL	.AYA			
		Name of Contact Person	1		
	PRIME MARBLE AND TIL	PRIME MARBLE AND TILE RESTORATION CORP			
	Firm/ Company				
	1400 NW 15TH CTAPT 205				
		Address			
	BOCA RATON, FL 33486				
		City/ State and Zip Code	2		
	primemtrestoration@gmail.c	om			
	E-mail address: (to be us	sed for future annual report	notitication)		
For further inform	ation concerning this matter, plea	se call:			
GUSTAVO A FL	ORES ZELAYA	at (	465 - 6259		
Na	me of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fe	e □\$43.75 Filing Fee & Certificate of Status	S43.75 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 Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

## Articles of Amendment to **Articles of Incorporation** of

PRIME MARBLE AND TILE RESTORATION CORP

(Name)	of Corporation as currently filed	with the Florida Dent, of State)	<del></del>
P20000089161	or Corporation as currently med	with the Horida Dept. of State	
	(Document Number of Corpo	ration (if known)	
Pursuant to the provisions of section 607.	1006, Florida Statutes, this <i>Florida</i>	Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A profes	y," or "incorporated" or the abbrevessional corporation name must co	viation "Corp.,"
P. Unter new principal office address	if applicable:	72.00	2021
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			APR TO
		·	Q ;
C. Enter new mailing address, if appl	iaakla.		AH O
(Mailing address MAY BE A POST)			<u> </u>
-		•	200
D. If amending the registered age <u>nt ar</u>	nd/or registered office address in l	Florida, enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent	GUSTAVO A FLORES ZELAYA	4	
<u></u>	1400 NW 15TH CT APT 205		
	(Florida street addr	ress)	<del></del>
New Bestever LOGG - Address	BOCA RATON	, Florida	86
New Registered Office Address:	(City)		(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist	ered agent. Lam familiar with and	l accept the obligations of the posit.	ion.
	(H)		
	Signature of New Registere	ed Agent, if changing	
Check if applicable	$\wedge$		
слеск и арписари			

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.

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>	Address
l) Change	P	KIARA AMAYA	1400 NW 15TH CT APT 102
Add			BOCA RATON, FL 33486
X Remove 2) X Change	P	GUSTAVO A FLORES ZELAYA	1400 NW 15TH CT APT 205
Add			BOCA RATON, FL 33486
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	r <u>e</u> :
EASE ADD THE EIN FOR THE FEI/EIN NUMBER FOR PRIM	IE MARBLE AND TILE RESTORATION CORP
HE EIN NUMBER IS: 85-4128127	
<del></del>	
If an amendment provides for an exchange, reclassification, o provisions for implementing the amendment if not contained (if not applicable, indicate N/A)  A	r cancellation of issued shares, in the amendment itself:
A	

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	04/03/2024	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
•	/08/2024	
<u></u>	(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 requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were as action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes cast for the amesufficient for approval.	endment(s)
must he separately provided for	oproved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment for the amendment (s) was/were sufficient for approval	
by	(voting group)	
04/03/202 Dated	4	
select	director, president or other officer – if directors or officers have red, by an incorporator – if in the hands of a receiver, trustee, or onted fiduciary by that fiduciary)	
	GUSTAVO A FLORES ZELAYA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	