P2100088321

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| · |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| W23000082214 |
| M23000082214 |





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03/24/23--01007--015 **43.75

07/18/2023 S.C



June 12, 2023

STANLEY P ANDRUS 8061 PAGODA DR SPRING HILL, FL 34606

SUBJECT: GOT TILE? INSTALLATIONS, INC

Ref. Number: P21000088321

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a NON PROFIT CORPORATION, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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 cal (850) 245-6050.

Shaunteria Cobbs
Regulatory Specialist II

Letter Number: 923A00013244

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: KEEP ON TRACK | K INC | |
|----------------------------|--|--|---|
| DOCUMENT NUMBI | | | |
| The enclosed Articles of | f Amendment and fee are su | bmitted for filing. | |
| Please return all corresp | ondence concerning this ma | tter to the following: | |
| S | TANLEY P ANDRUS | | |
| _ | TEED ON TO A CIV. INC. | Name of Contact Pers | on |
| K - | EEP ON TRACK INC | | |
| | | Firm/ Company | |
| 8 | 061 PAGODA DR | | |
| _ | · | Address | |
| S | PRING HILL FL 34606 | | |
| 1 | | City/ State and Zip Co | de |
| k | eepontrack23@yahoo.com | | |
| | E-mail address: (to be us | sed for future annual repo | rt notification) |
| For further information | concerning this matter, pleas | se call: | |
| JUDY MASTRO | | at (352 | ode & Daytime Telephone Number |
| Name of | Contact Person | Area C | ode & Daytime Telephone Number |
| Enclosed is a check for t | he following amount made | payable to the Florida De | partment of State: |
| S35 Filing Fee | S43.75 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) |
| Amen Division P.O. B | ng Address dment Section on of Corporations sox 6327 assec, FL 32314 | Amer Divise The G 2415 | t Address Indiment Section It ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 Inassee, FL 32303 |

Articles of Amendment to Articles of Incorporation of

GOT TILE? INSTALLATIONS INC.

| (Name | of Corporation as curren | tly filed with the Florida | Dept. of State) |
|---|-------------------------------|----------------------------|---------------------------------------|
| P21000088321 | or corporation as carren | ., | , Depti of Ottale |
| | (Document Number | of Corporation (if known) |) |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | .1006, Florida Statutes, this | s Florida Profit Corporat | ion adopts the following amendment(s) |
| A. If amending name, enter the new n | ame of the corporation: | | |
| | | | The new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association," | Corp," "Inc," or "Co". | A professional corporat | |
| B. Enter new principal office address, | if applicable: | N/A | 707 |
| (Principal office address <u>MUST BE A S</u> | | | |
| | | | 2029 NAR 24 |
| | | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | N/A | ි. ක් |
| (Maning dataress MAT BLATOST | OI FICE BOX) | | W. 8. 40 |
| | | | |
| | | | |
| D. If amending the registered agent ar | nd/or registered office add | dress in Florida, enter th | e name of the |
| new registered agent and/or the ne | w registered office addres | <u>is:</u> | - |
| Name of New Registered Agent | N/A | | |
| | | | |
| | (Florida s | treet address) | |
| New Registered Office Address: | N/A | | . Florida |
| | | (City) | (Zip Code) |
| | | | |
| N. B | | | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist | | | ations of the position. |
| , | - | | |
| | | | |
| | Signature of New | Registered Agent, if chang | ving |
| | Digitalure of Hen | regimereu rigem, y chang | •"'6 |
| 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.

| 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) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | N/A | |
| Add | | | |
| Remove | | | |
| 2) Change | | | 2023 |
| Add | | | 207311178 24 |
| Remove 3) Change | | | |
| Add | | | <u> </u> |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | · · · · · · · · · · · · · · · · · · · |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | |
|---|---------------------------------------|
| N/A | |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | 2023 MAR 24 Ali |
| N/A | |
| | |
| | |
| | |
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| | |
| | |

| N/A | |
|--|---------------------------|
| The date of each amendment(s) adoption: | , if other than the |
| date this document was signed. | |
| N/A Effective date <u>if applicable</u> : | |
| (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 listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required. | and shareholder |
| ☐ 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) | |
| Dated | |
| (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) | 2023 HAR |
| STANLEY P ANDRUS | R 24 |
| (Typed or printed name of person signing) | |
| PRESIDENT | - |
| (Title of person signing) | |