Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

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Account Number : 120200000160
Phone : (772)460-1000

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mail	Address:	 	

COR AMND/RESTATE/CORRECT OR O/D RESIGN IMPERATRIZ TILEWORKS, INC

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A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

TO: Amendment Section

(((H210004414643)))

COVER LETTER

Division of Corporatio	ns		
NAME OF CORPORATI	ON: IMPERATRIZ TILI	EWORKS, INC	
DOCUMENT NUMBER:	P21000096161	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of Ar	nendment and fee are sub	mitted for filing.	
Please return all correspond	lence concerning this mat	ter to the following:	
	*	Claudio Toledo Ribeir	0
		Name of Contact Person	
		TaxPeople, LLC	
		Firm/ Company	
		2855 SW Brighton St	,
		Address	-
		Port St Lucie, FL 34953	3
_		City/ State and Zip Code	
		marcilio4141@gmail.com	m
	E-mail address: (to be us	ed for future annual report	notification)
For further information cor	ncerning this matter, pleas	e call:	
10.14.11.11.11.11.11.11.11.11.11.11.11.11.	····································		
Claudio Toledo Ribeiro		at (772	460.1000
Name of Co	ontact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	ertment 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 Division The C 2415 P	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment

Artic	to cles of Incorporation	23 H 6
	of	星 🍍
IMPERA	TRIZ TILEWORKS, INC	Ø,
(Name of Corporation as	s currently filed with the Flori	da Dept. of State)
	P21000096161	
(Document)	Number of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	nutes, this Florida Profit Corpor	ration adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:	·
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviati	"Co". A professional corpor	The new porated" or the abbreviation "Corp.," ration name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u>SS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered (office address in Florida, ente	r the name of the
new registered agent and/or the new registered office	ce address:	- We just of the
Name of New Registered Agent		
	(Florida street address)	<u> </u>
New Registered Office Address:		, Florida
New Registered Office Add Six.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accept the o	obligations of the position.
Signatur	re of New Registered Agent, if ci	hanging .

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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: X Change	<u>PT</u>	John Doe	•
X Remove	¥	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	KIARA SHAYLEN SHEAFFER	1775 Valley Forge Dr
X Add			Titusville, FL 32796
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			
		Page 2 of 4	
E. If amending or add (Attach additional sh	ing addi eets, if n	tional Articles, enter change(s) here: ecessary). (Be specific)	

<u>.</u>	(((H21000441464 3)))
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of contained in the amendment itsel	<u>şņares,</u> <u>f:</u>
Page 3 of 4	
	, if other tha
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	sification, or cancellation of issued of contained in the amendment itself the property of the same of

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Note: If the date inserted in this block does not meet the applicable stanutory 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 adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendme icient for approval.	nt(s)
· · · · · · · · · · · · · · · · · · ·	oved by the shareholders through voting groups. The following state arch voting group entitled to vote separately on the amendment(s):	rment .
"The number of votes cast fo	the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	(voting group)	
action was not required. The amendment(s) was/were adopt action was not required. Dated Signature	ted by the board of directors without shareholder action and shareholder ted by the incorporators without shareholder action and shareholder actor, president or other officer – if directors or officers have not been action, president or other officer – if directors or officers have not been action.	SECRETA OF
selected,	by an incorporator – if in the hands of a receiver, trustee, or other of fiduciary by that fiduciary)	
	Claudio Toledo Ribeiro	
_	(Typed or printed name of person signing)	7
	Incorporator	
\bar{c}	Fitle of person signing)	