## P22000017268

(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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2022 HAY 13 PH 3: 32 SECRETARY OF STAN

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: <u>Cardinal Tile Co.</u> DOCUMENT NUMBER: <u>P220000 17268</u>
DOCUMENT NUMBER: <u>P220000 /7268</u>
The enclosed Articles of Amendment and fee are submitted for filling.
Please teturn all correspondence concerning this matter to the following:
Cardinal Tile Co.  Firm/Company
(0572 SW 60th Ave. Address
Ocala FL 34474  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Grégory Barnés at (407) 600-6761 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section

Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation of Card Act T/2 Co. (Name of Corporation as currently filed with the Florida Dept. of State) P 220000 17268 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NIA	The nev
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	"company," or "incorporated" or the abbreviation "Corp., A professional corporation name must contain the work
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	6527 SW 6015 AVY Craia FL 34474
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent  William Street Agent Company (Florida)	<u>'88:</u>
New Registered Office Address: 4,5 2,5 Si	Street address)  J Ocala Florida 34474  (City) (210 Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familio	
G	Registered Agent, if changing

Check if applicable

 $\square$  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.

Example: <u>X</u> Change	<u>PT</u> <u>Jol</u>	<u>ın Dog</u>	
$\underline{X}$ Remove	<u>V</u> <u>Mi</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>_P</u>	William STILES	6350 SE 881 51
Add			Crala 1-c 34472
Kemove		_	
2) 🔀 Change	<u> </u>	Gregory Barnes	6522 SW 6015 AV
Add		· ·	Orala FL 34474
Remove 3 ) Change		MA	
Add		·	
Remove		11	
4) Change		$-\mathcal{N}\mathcal{H}$	
Add			
Remove		11/1	
5) Change	<del></del>		
Add			
Remove		. 111	
6) Change		NIM	
Add			A
Remove			

(Attach additional shee	additional Articles, enter change(s) here: s, if necessary). (Be specific)	
	_	
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-		
If an amendment pro-	ides for an exchange, reclassification, or cancellation of issu	ued shares,
(if not applicable	nenting the amendment if not contained in the amendment indicate $N/A$ )	<u>itsell:</u>
<del>т. т. т</del>		
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

The date of each amendment(s) adoption: 54/32 , if other than if
late 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 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 Cyoting group) "
(voting group)
Dated 5-9-22
Signature (22)
(By adirector, 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)
Cregory Barnes (Typed or printed name of person signing)
Megident (Title of person signing)
(Title of person signing)