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07/28/24--0101.--001 ** 1.

2021. 29 77 9:06

CT 8/3/2024

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: GARCIA TILE SO	DLUTIONS INC	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	LESLIE J VENANCIO		
,		Name of Contact Person	n
		Firm/ Company	
	5804 10TH ST CT E		
		Address	
	BRADENTON, FL 34203		
		City/ State and Zip Cod	e
		sed for future annual report	notification)
	n concerning this matter, plea		200,0100
LESLIE J VENANCIO		at () 896-0106 ode & Daytime Telephone Number
Name o	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor	Address dment Section on of Corporations n Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

2024 27 29 77 9:06

GARCIA TILE SOLUTIONS INC	29 / 9:06
(Name of Corporation :	as currently filed with the Florida Dept. of State)
P24000006855	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)
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, enter the name of the
new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
Hen Registered Office Hadress.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I as	ered Agent: m familiar with and accept the obligations of the position.
Signatu	we of New Registered Agent, if changing

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	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>		Name	Address	
1) Change	VP		LUIS E GARCIA-DE JESUS	5804 10TH ST CT E	
XX Add		_		BRADENTON, FL 34203	
Remove					
2) Change	<u> </u>	_			
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			
Add					
Remove					

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
			
			
•			
	 .		VI 4 - 10 P
			1
	<u> </u>		
			-
f an amendment provides for an excl	aange, reclassification, or	r cancellation of issued s	hares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	in the amendment itself:	<u>:</u>
<u>.</u>			
			

07/22/2024	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
07/22/2024 Effective date if applicable:	
(no more th	an 90 days after amendment file date)
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's record	pplicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders, by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle	
"The number of votes cast for the amendment(s) wa	/were sufficient for approval
by(voting group)	,"
(voting group)	
The amendment(s) was/were adopted by the board of dire action was not required.	etors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder
Dated	
	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court iary)
LESLIE J. VENANCIO	
(Typed or pri	nted name of person signing)
PRESIDENT	
(*	itle of person signing)