# V64703

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

FILED 2009 JAN 12 PM 1: 19

Amend + N/C TB 1-20-09

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	TILEMASTERS OF CENTRAL FLORIDA, INC.
DOCUMENT NUMBER: V6470	03
The enclosed Articles of Amendment	and fee are submitted for filing.
Please return all correspondence conce	rning this matter to the following:
	SHAY HAWKINBERRY (Name of Contact Person)
TILE	MASTERS OF CENTRAL FLORIDA, INC. (Firm/ Company)
	000 40 PEAGUERLYB - QUETE 000
14	286-19 BEACH BLVD., SUITE 236 (Address)
	14 OK OON (# 1 5 - 51 20050
	JACKSONVILLE, FL 32250 (City/ State and Zip Code)
For further information concerning this	s matter, please call:
SHAY HAWKINBERRY (Name of Contact Person)	at ( 904 ) 612-8777  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following a	amount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fe Certificate of St	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: TILEMASTER	S OF CENTRAL FLORIDA, INC (Name of Corporation)
DOCUMENT NUMBER:_	• • •
The enclosed Officer/Directo	r Resignation for a Corporation and fee are submitted for filing
Please return all corresponder	nce concerning this matter to the following:
SHAY HAWKINBERRY	
(Name	of Person)
TILEMASTERS OF CENT	FRAL FLORIDA, INC.
(Name of F	irm/Company)
14286-19 BEACH BLVD.,	SUITE 236
(Ad	dress)
JACKSONVILLE, FL 3225	50
(City/State	and Zip Code)
For further information conce	erning this matter, please call:
SHAY HAWKINBERRY	at ( 904 ) 612-8777 (Area Code & Daytime Telephone Number)
(Name of Person	on) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.0	0 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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

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t. of State)	<u>se</u> e.r/	STATE
	_0	"OA

# TILEMASTERS OF CENTRAL FLORIDA, INC. (Name of Corporation as currently filed with the Florida Dept. of State) V64703 (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:

ne new name must be distinguishable incorporated" or the abbreviation "Corporation in Sociation," or the abbreviation "P.A."	o.," "Inc.," or Co.,	" or the designation '	Corp, " "Inc," or
Enter new principal office address, if	applicable:	14286-19 BEACH BL\	/D.#236
rincipal office address <u>MUST BE A STR</u>	REET ADDRESS )	JACKSONVILLE, F	FLORIDA 32250
Enter new mailing address, if applica (Mailing address MAY BE A POST OF			
			· · · · · · · · · · · · · · · · · · ·
If amending the registered agent and/new registered agent and/or the new r			er the name of the
		lress:	er the name of the
new registered agent and/or the new r	SHAY HAWKINI	lress:	er the name of the
new registered agent and/or the new r	SHAY HAWKINI 14286-19 BEAC	I <u>ress:</u> BERRY	er the name of the
<u>Name of New Registered Agent:</u>	SHAY HAWKINI 14286-19 BEAC	Iress: BERRY H BLVD., SUITE 236 da street address)	er the name of the
Name of New Registered Agent:	SHAY HAWKINI  14286-19 BEAC  (Florid	Iress: BERRY H BLVD., SUITE 236 da street address)	
<u>Name of New Registered Agent:</u>	SHAY HAWKINI  14286-19 BEAC  (Florid	Iress: BERRY H BLVD., SUITE 236 da street address) . (City)	, Florida <u>32250</u>

Page 1 of 3

Signature of New Legistered 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)

<u>Title</u>	Name	Address	Type of Action
PRES	MICHAEL HOLT	3854 PAINTED BUNTING WAY JACKSONVILLE, FL 32224	·
PRES	WALTER HOLT	3854 PAINTED BUNTING WAY JACKSONVILLE, FL 32224	Add Remove
<u>VP</u>	ANNA HOLT		Add Remove
F. If an amer provisions	g or adding additional Articles, enter of tional sheets, if necessary). (Be specific and the sheets, if necessary). (Be specific adment provides for an exchange, rectard and the same amount if new policable, indicate N/A)	essification, or cancellation of iss	
-	Расе	2 of 3	

The date of each amendmen	t(s) adoption: 01/01/09
Effective date <u>if applicable</u> :	01/01/09
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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)
action was not required.  The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	1-1-09 Mathalan
(By sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
αρι	
	(Typed or printed name of person signing)
	(Title of person signing)