

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: American Glass Associates of Tallahassee, INC.
Name of Corporation

DOCUMENT NUMBER: F08000004594

The enclosed (*resolution changing alternate name*)
Please return all correspondence concerning this matter to the following:

JAMES DAVIS
Name of Contact Person

LICENSEFORBUSINESS.COM
Firm/Company

327 HOLLOW CREEK LN
Address

HAVANA, FL 32333
City/State and Zip Code

james@licenseforbusiness.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES DAVIS at (850) 322-7117
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$35.00 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FILED
11 NOV 28 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESOLUTION OF THE BOARD OF DIRECTORS TO CHANGE
THE ALTERNATE NAME FOR USE IN FLORIDA**

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned SPENCER DAWKINS, do hereby certify
(Name)

that this Resolution of the Board of Directors of GLASS ASSOCIATES, INC.
(Name of Corporation)

a corporation duly organized and existing under the laws of GEORGIA,
(State or Country)

was adopted on 11/28/11, changing the alternate

name in Florida from AMERICAN GLASS ASSOCIATES OF TALLAHASSEE, INC. to
(Current Alternate Name)

AMERICAN GLASS OF TALLAHASSEE, INC.
(Alternate Name) NOTE: Must contain a corporate suffix

and its real name is unavailable in Florida.

Date: 11/28/11

[Signature]
Signature of Chairman, Vice Chairman of the Board, a
director or any officer

President
Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and mail to:

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