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To:
Division of Corporations
Fax Number : (850)205-0380

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

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05 NOV -3 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BASIC AMENDMENT

RECEIVED
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DIVISION OF CORPORATIONS

PROFESSIONAL QUALITY KITCHEN CABINETS CORP.

Certificate of Status	0
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Amend
(1a) 11.3.05

FILED
05 NOV -3 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

PROFESSIONAL QUALITY KITCHEN CABINETS CORP.

(present name)

P 05000068749
(Document Number of Corporation (If known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

Article V,VI :

DELETE : JOEL TRUY, 5350 SW. 6 ST. MIAMI,FL.33134 — DIRECTOR, VICE-PRESIDENT & SECRETARY (50 shares)

CHANGE : MANUEL CABANAS DIRECTOR PRESIDENT ,SECRETARY & TREASURER
100 shares

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: 10-14-05.

FOURTH: Adoption of Amendment(s) (CHECK ONE)

X☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) 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 ______________________."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 14 th. day of October, 2005.

Signature X Joel T.
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

JOEL TRUY
(Typed or printed name)

DIRECTOR/SECRETARY /VICE-PRESIDENT
(Title)

SUBSCRIBED AND SWORN TO BEFORE ME THIS 14 th. day of October 2005.

NOTARY PUBLIC

Notary Public - State of Florida