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TALLAHASSEE, FLORIDA

C. LEWIS AUG 2 2 2013 EXAMMER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	A1AEXPI	RESS INC		
DOCUMENT NUMBER	P12000081	1355		
The enclosed Articles of A	<i>mendment</i> and fee are su	bmitted for filing.		
Please return all correspor	dence concerning this mat	tter to the following:		
	JO	EL RODRIGUE	Z	
	Name of Contact Person			
	A1A	TILE DISTRIBU	TORS INC.	
		Firm/ Company		
	1456 NW 82ND AVENUE			
	Address			
	L	ORAL, FL., 331		
		City/ State and Zip Code	2	
	M	SN40@HOTMA	IL.COM	
-	E-mail address: (to be us	sed for future annual report	notification)	
For further information co	ncerning this matter, pleas	e call:		
JOEL RODRI	GUEZ	at (305	, 244-4184	
Name of C	ontact Person		de & Daytime Telephone Number	
Enclosed is a check for the	e following amount made p	payable to the Florida Depa	artment of State:	
□ \$35 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)	
Amendr Divisior P.O. Bo	Address nent Section of Corporations x 6327 ssee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to

FIL	ED
13 AUG 20 SECRETA	PM ,
SECRETA	177 4:40

Articles of Incorporation the Florida Dept. of State (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: A. If amending name, enter the new name of the corporation: A1A TILE DISTRIBUTORS INC. name must be distinguishable and contain the word "corporation," "company." or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 1456 NW 82ND AVENUE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) DORAL, FL 33126 C. Enter new mailing address, if applicable: **1456 NW 82ND AVENUE** (Mailing address MAY BE A POST OFFICE BOX) **DORAL, FL 33126** 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 office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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> <u>Johr</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>V, S</u>	Judith E. Paba	1456 NW 82ND AVENUE
X Add			DORAL, FL 33126
Remove			
2) Change	- 		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
			,
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

TILES WHOLESALE, DISTRIBUTORS
F. 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: (if not applicable, indicate N/A)
N/A

	. 07/09/2013	FILED
The date of each amendment(s) add date this document was signed.	option:	FILED The than the SECHETA STATE ST.
Effective date <u>if applicable</u> :	(no more than 90 days after ar	SECHETANY UF STATE mendment file date AHASSEE. FLORIDA
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	eted by the shareholders. The number of vo	etes cast for the amendment(s)
	oved by the shareholders through voting groach voting group entitled to vote separately	
"The number of votes cast for	or the amendment(s) was/were sufficient for	r approval
by	(voting group)	"
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors without sharel	holder action and shareholder
The amendment(s) was/were adopaction was not required.	ted by the incorporators without shareholde	er action and shareholder
DatedSignature	8/19/13 A	
(By a dir selected	ector, president wrother officer – if directo by an incorporator – if in the hands of a red fiduciary by that fiduciary)	
	JOEL RODRIGUEZ	•
-	(Typed or printed name of	f person signing)
	PRESIDENT	

(Title of person signing)