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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: YANES	TILE & REMODEL		
•	(Name of Lim	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
		_	
Please return all correspon	ndence concerning this matter	_	
	Danilo	(Name of Person) tile & Remodeli (Firm/Company)	
		(Name of Person)	· · · · · ·
	Xanes	tile & Remodeli	ng, uc.
	•	(Firm/Company)	•
	7390	S.W. 164 ST. (Address) Bay, FL 33	
	O I I	(Address)	
	Palmetto	Bay, FL 33	2/57
		(City/State and Zip Code)	
For further information co	oncerning this matter, please ca	all:	
Danilo	MUTIE	at (305) 525-46 (Area Code & Daytime	194
(Name o	f Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	30.00 Filing Fee &	□\$55.00 Filing Fee &	□\$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

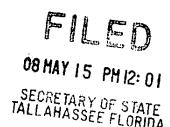
MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(Zip Code)

YANES TILE & REMODELING, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Sept. 26th 07 and assigned 070000 99391 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A.POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(City)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = M MGRM =	lanager Managing Membe	r			
<u>Title</u>	<u>Name</u>		Address		Type of Action
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D. If amer	nding any other inf	ormation, enter cha	nge(s) here: (Attach	additional sheets, if nece	ssary).
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Filing Fee: \$25.00