M2724

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Amend

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I ALBRITTON

COVER LETTER

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TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Capital Colass of Miami Co2D. DOCUMENT NUMBER: M27241				
DOCCMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Eunelia Alvar EZ Name of Contact Person				
Capital Glass of Miami, Coz). Firm/Company				
1505 SWIZST Address				
Miau: 71 33135				
Capitalalass mia & hutmail com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Eumelia alva (EZ at (305) 790-6052 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Street Address Amendment Section				

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

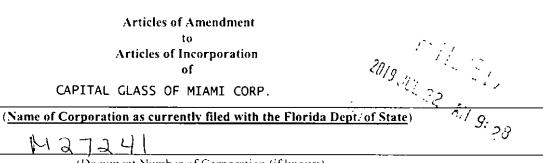
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment Articles of Incorporation

of



CAPITAL GLASS OF MIAMI CORP.

M 2 241	•
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Eumelia alvarez
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1505 SW 12 ST
	1505 SW 12 ST Miami 7 33135
D. If amending the registered agent and/or registered office addresses registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent Eume	lia Glualez
1505 (Florida stree	SW 12 ST
The state of the s	Florida 33135 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
2.0	
Signature of New Reg	gistered 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)

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	<u>John Do</u>	<u>e</u>	
X Remove	<u>V</u>	Mike Jos	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	Pres	<u> </u>	Napoleon alvalez	•
Add				MiaNIF1. 33135
<u> </u>				
2) Change	Pres	<u> </u>	Eumelia Qluci EZ	1505 SW12ST Miani, Fl. 33135
X_ Add				<u></u>
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
		_		
Add				
Remove				

	nal sheets, if necessary). (Be specific)
<u> </u>	
 -	
	
_	
'an amandm	ent provides for an exchange, reclassification, or cancellation of issued shares,
an amenume	implementing the amendment if not contained in the amendment itself:
(if not an	olicable, indicate N/A)
(9 10.1 upp	TOTAL TANKE

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	
"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 sha action was not required.	archolder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Dated	
(By a director, president of other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)	ot been her court
Eumelia alvalez (Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	