M27241

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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corpo	rations			
NAME OF CORPOR	ATION: Capital Glass of M	iami, Corp		20 KM 18 PM 2: Lk
DOCUMENT NUMB				50 M
	of Amendment and fee are su	bmitted for filing.		79
Please return all corres	pondence concerning this ma	tter to the following:		
	Eumelia Alvarez			
		Name of Contact Person	1	
	Capital Glass Of Miami. Corp	p		
		Firm/ Company		
	1505 SW 12th Street			
•		Address		
	Miami. Florida 33135			
		City/ State and Zip Code	2	
	capitalglassmia@hotmail.com	n		
		sed for future annual report	notification)	
	`	•		
For further information	n concerning this matter, pleas	se call:		
Eumelia Alvarez		at (<u>305</u>	790-6052	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation of

(Name o	f Corporation as current	ly filed with the Florida De	pt. of State)	
M27241				
	(Document Number of	of Corporation (if known)	F _k	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation :	adopts the following amendment(s) to	
A. If amending name, enter the new na	ime of the corporation:			
			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation	"or the abbreviation "Corp.," name must contain the word	
B. Enter new principal office address,	if annlicable:	Napoleon Alvarez		
(Principal office address MUST BE A S		 		
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1505 SW 12th Stree		
		Miami, Florida 33135		
D. If amending the registered agent an	d/or registered office add	dress in Florida, enter the n	ame of the	
new registered agent and/or the nev		<u>ss:</u>		
Name of New Registered Agent	Napoleon Alvarez			
	1505 SW 12th Street			
	(Florida s	treet address)		
New Registered Office Address:	Miami, Florida		. Florida 33135	
Hew hegistered Office Hadress.		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen Tered agent I am familiar	it: with and accept the obligation	ons of the position.	
Thereby accept the approximent as region		/ //	, _,	
		un II		
	Multi	14/0		
	Signature of New	Begistered Agent, if changing	!	
Theck if applicable				
☐ The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11) (e), F.S.		

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)

Example:

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.

X Change	<u>PT</u>	John Doc		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nan</u>	<u>ne</u>	Address
1) Change	Pres.	Nap	poleon Alvarez	1505 SW 12th Street
X Add		-		Miami, Florida 33135
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)
If an amount municipal for an available	hange replaceification or cancellation of icsued shares
If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the am	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the am	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) ad date this document was signed.	option:, if ot	her than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be lartment of State's records.	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	, n	
,	(voting group)	
May 13, 20 Dated	0	
Signature	ector, president or other officer – if directors or officers have not been	
	by an incorporator - If in the hands of a receiver, trustee, or other court	
appoint	d fiduciary by that fiduciary)	
	Eumelia Alvarez	
	(Typed or printed name of person signing)	
	√P	
	(Title of person signing)	