Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SMART TAX Account Number : 120090000034 : (954)782-3610 Phone Fax Number ; (954)366-3239

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

| Ems | i 1 | Address: | |
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| P.III.A | | ACHILLESS. | |

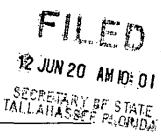
COR AMND/RESTATE/CORRECT OR O/D RESIGN

F & D TILE, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$35.00 |

H12000164372 3

Articles of Incorporation of



F & D TILE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

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(Document Number of Corporation (if known)

nendment(s) to

| | e corporation: | | |
|---|----------------------------------|-----------------------------|-----------------------------------|
| name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or | Torp," "Inc," or "Co". A profess | or "incorporated" or the ab | The new breviatio ontain th |
| B. <u>Enter new principal office address, if applic</u> (Principal office address <u>MUST BE A STREET</u>) | able: | | |
| | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) | <i>BOX</i>) | | |
| | | | |
| D. If amending the registered agent and/or reginew registered agent and/or the new register | | enter the name of the | |
| Name of New Registered Agent | | - | |
| | (Florida street address) | | |
| New Registered Office Address: | (City) | , Florida(Zip Code) | |
| | , =- ,, | (1-1-1-1-1) | |

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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 | PI | John Doe | |
|-------------------------------|-----------------|--------------------|--|
| X Remove | <u>v</u> | Mike Iones | |
| _X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| Change X Add Remove | 5 | FRANCELIS B. PARRA | 12721 NW 21ST PLACE CORAL SPRINGS, FL 33071 |
| 2) Change Add Remove | <u>"</u> | <u> </u> | |
| 3) Change Add Remove | | | |
| 4) Change Add Remove | **** | | |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | | |

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| E. If amending or adding additions (attach additional sheets, if neces | al Articles, enter change(s) h sary). (Be specific) | iere: | |
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| F. If an amendment provides for a provisions for implementing the (if not applicable, indicate) | <u>ie amendment if not contain</u> | or cancellation of issued shared in the amendment itself: | ės <u>.</u> |
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| The date of each amendment(s) at | topicion: 06/20/2012 | |
|--|--|--------|
| Effective date if sunlicable: | (no more than 90 days after amendment file date) | |
| | in more state of safe speed and another first safe | |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes east for the amendar efficient for approval. | ena(e) |
| | roved by the shareholders through valing groups. The following sta- each voting group extitled to vote superately on the amcadments): | tement |
| | for the amendment(s) was/were sufficient for approval | |
| ъу | (Louing group) | |
| | (voting group) | |
| The unendouset(s) was/were add action was not required. | pred by the board of directors without shoreholder action and shareh | older |
| The amendment(s) was/were ado action was not required. | pted by the incorporators without sheedolder action and shareholde | r |
| Dated 06/20 | /2012 | |
| | | |
| Simanue | | |
| (Burette | reason, president or other parties - if directors or officers have not be | |
| | i, by an incorporator – If in the hands of a receiver, trustee, or other o od fiduciary by that fiduciary) | court. |
| - | FABIO PARRA | |
| • | (Typed or printed name of poston signing) | |
| | PRESIDENT | |
| • | (Title of person signing) | |

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