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(C	ity/State/Zip/Phone #)
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/D	usiness Entity Name)	
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Amend

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Roca Bruja I de Corp. (Name of corporation)
DOCUMENT NUMBER: 103000125379
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Aaron Brice (Name of contact person)
Roca Bruja Tile Corp (Firm/Company)
607 Marcus St (Address)
Venice 7/34285-6016 (City/state and zip code)
For further information concerning this matter, please call:
Aoron Brice at (941) 232-8299 (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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Articles of Amendment to Articles of Incorporation Articles of Incorporation Articles of Incorporation
Articles of Incorporation Articles of Incorporation
of of the opposition of the state of state
Koca Bruja lile Corp.
(Name of corporation as entrently filed with the Florida Dept. of State)
P03000125379
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Article 9 amend to add new Vice Presiont
None: Barrett Long
Address 490 Elm St
Englewood. 71 34223
Article 9 Amend to Delake Steven 5. Mc Nott - UP + SE
(Attach additional pages if necessary)
If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: 3/5/05
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"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 shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signed this 8 day of MANCh
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President (Title of person signing)

FILING FEE: \$35