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COVER LETTER

TO: Amendment Section Division of Corporations

	ATION: GLACE MU		OMPANY	
DOCUMENT NUMBE	_{R:} <u>P0700006653</u>	1		
	f Amendment and fee are su			
Please return all corresp	ondence concerning this ma	tter to the following:		
	SAN	IDRO A. PALAC	OIO	
_	01.405.14	Name of Contact Person		
_	GLACE M	ULTISERVICE (COMPANY	
	0400 10	Firm/ Company	- 400	
_	3100 NV	N 72 AVE SUIT	E 123	
		Address		
_	IV	IIAMI, FL 33122		
4		City/ State and Zip Code	2	
		AY28@HOTMAI		
 	E-mail address: (to be us	sed for future annual report	notification)	
For forther information		o call.		
ror further information (concerning this matter, pleas	e can,		
SANDRO A.	PALACIO	at (954	513-0561	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	ertment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ng Address		Address	
	dment Section	Amendment Section		
	on of Corporations Box 6327	Division of Corporations Clifton Building		
	assee, FL 32314		xecutive Center Circle	
			issee, FL 32301	

Articles of Amendment Articles of Incorporation

of

GLACE REFINISHIN	IG COMPANY		
(Name of Corporation as currently filed with the F	lorida Dept. of State)		
P070000665	531		
(Document Number of Corporation (i	f known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation ad	opts the following an	nendment(s)
A. If amending name, enter the new name of the corporation:			
GLACE MULTISERVIC	E COMPANY	Th	e new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation "	Co". A professional corpora	rated" or the abbre tion name must cont	eviation tain the
B. Enter new principal office address, if applicable:		Ø.	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			8
	All the state of t		. ⊗
		****	- 17
C. Futur and address if and leables		(\$\frac{1}{2}\)	21
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			FILED 21 PM
		29	2
			0
		, iii	•
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address		ne of the	
Name of New Registered Agent			
·			
(Florida str	reet address)		
New Registered Office Address:	, Florida_		
(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent		C.I.	
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligation:	s of the position.	

Signature of New Registered 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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X.Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	LUNA, RODRIGO	3100 NW 72 AVE STE 123
Add			MIAMI, FL 33122
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach aa	lditional shee	z additional Ar ts, if necessary).	(Be specific)			
					 	
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				fication on so-	a allation of icon	nd abarra
ran ame	enament prov	vides for an exc	endment if not	contained in the	icellation of issu- ne amendment it	solf.
(if n	ot applicable	indicate N/A)	endment ii not	contained in the	it amenament it	50111
(9	от аррисает,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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The date of each amendment	t(s) adoption: SEPTEMBER 19, 2012
Effective date if applicable:	SEPTEMBER 19, 2012
	(no more than 90 days, after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/weby the shareholders was/weby	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_SE	PTEMBER 19, 2012
Se	By a director, president or other affiger – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)
	SANDRO A. PALACIO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)