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ON SIGN OF CORPORATIONS
TALLAHASSEE FLORIDA

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CORPORATION NAME(S) &	DOCUMENT NUMBER(S) (if known):
1. Rústicroof	Claytiles Inc.
(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3	,,
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NEW FILINGS	<b>AMENDMENTS</b>
Profit	Amendment
NonProfit	Resignation of R.A., Officer/ Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
OTHER FILINGS	REGISTRATION/
Annual Report	QUALIFICATION
Fictitious Name	Foreign
Name Reservation	Limited Partnership
· · · · · · · · · · · · · · · · · · ·	Reinstatement

Trademark

Other

## Articles of Amendment to Articles of Incorporation of

FILED

RUSTICROOF CLAYTIL	ES INC. 2009 NOV 17 PM 1:51
(Name of Corporation as currently filed with	the Florida Dept. of State)
	the Florida Dept. of State)  FALLAHASSEF FLORID;
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statuamendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
	The new
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associ	Corp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	14820 SW 137 ST
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI, FL 33196
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14820 SW 137 ST
	MIAMI, FL 33196
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:	
New Registered Office Address: (Flor	rida street address)
· 	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	

## 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)

<u>Title</u>	Name .	Address	Type of Action
P/D	MARIO GARCIA	10691 N KENDALL DRIVE SUITE 304 MIAMI. FL 33176	
<u>V/T/D</u>	ILEANA GARCIA	10691 N KENDALL DRIVE SUITE 304 MIAMI, FL 33176	☐ Add ☑ Remove
S/D	IVAN MOYEDA	10691 N KENDALL DRIVE SUITE 304 MIAMI, FL 33176	
	ding or adding additional Articles, additional sheets, if necessary). (Be V BOARD OF DIRECTORS/O		
RAFAEL	DE AVILA (P/D)		
BERNICI	E BAUDINO (S/D)		
15631 S\	W 100 TERR - MIAMI, FL 3319	96	
provis	mendment provides for an exchangions for implementing the amendment applicable, indicate N/A)	ge, reclassification, or cancellation of lent if not contained in the amendmen	issued shares, t itself:

The date of each amendmen	t(s) adoption: 11-16-09
•	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere 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	cast for the amendment(s) was/were sufficient for approval
by	**
•	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_11-	16-09
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	ILEANA GARCIA
	(Typed or printed name of person signing)
	VTD
	(Title of person signing)