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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DIAZ FINIS	H CARPENTRY	/ INC
DOCUMENT NUMB	ER: P0900001905	4	
	of Amendment and fee are su		
Please return all corres	pondence concerning this ma	tter to the following:	
	HUMBERTO DIA	Z	
•		Name of Contact Person	1
	DIAZ FINISH CA	RPENTRY INC	
•		Firm/ Company	
	100 SW 69 AVEN	NUE	
-		Address	
	MIAMI, FL. 3314	44	
•		City/ State and Zip Cod	e
	E-mail address: (to be us	sed for future annual report	notification)
	,		,
For further information	concerning this matter, pleas	se call:	
MAGGIE SAIZ		at (305	, 698-6800
Name of Contact Person Area Code & Da		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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	Articles of Incorporation	FILED
DIAZ FINISH CARPENTRY II	of NC	FILLU
(Name of Corporation as current		2013 DEC -2 PM 1: 34
P09000019054	ny med with the Florida Dept. of	
	er of Corporation (if known)	* SECTLINEY OF STATE — <u>JALLAHASSEE-FLO</u> RIDA
(Document Number	er of Corporation (II known)	3
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	orida Statutes, this <i>Florida Profit (</i>	Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	ne corporation:	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co". A profes. the abbreviation "P.A."	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	
D. If amending the registered agent and/or reg new registered agent and/or the new register		enter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
New Negistered Office Madress.	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		the obligations of the position.
Signatura	of New Registered Agent if changi	no

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	<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	VD	JONATHAN DIAZ	100SW 69 AVENUE
Add			MIAMI, FL. 33144
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary).	ticles, enter change . (Be specific)			
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			ation or concelled	ion of issued sha	res.
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provisions for in	mplementing the am	change, reclassificatendment if not con	ntained in the am	endment itself:	
provisions for in	t provides for an ex- mplementing the am cable, indicate N/A)	change, reclassific: nendment if not con	ntained in the am	endment itself:	
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provisions for in	mplementing the am	change, reclassific; nendment if not co	ntained in the am	endment itself:	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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.	
Dated_11/27/13	
Dated	
Signature Her to the Deep	
Signature (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)	
HUMBERTO DIAZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	