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SECRETARY OF STATE
TALLAHASSEE. FLORIDA
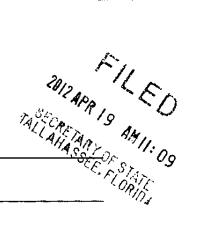FILED

Amend & N/C

APR 2 3 2012

T. BROWN

COVER LETTER

TO: Amendment Section
    Division of Corporations

NAME OF CORPORATION: A PLUS GLASS CORP

DOCUMENT NUMBER: P09000069332

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN E. EGUSQUIZA
Name of Contact Person

LAW OFFICES OF JOHN E EGUSQUIZA, P.A.
Firm/ Company

9960 SW 40TH STREET
Address

MIAMI, FL 33165
City/ State and Zip Code

JEELAW@BELLSOUTH.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN EGUSQUIZA   at (305) 223-8744
Name of Contact Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ $35 Filing Fee   ■ $43.75 Filing Fee &   ☐ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
     Certificate of Status   Certified Copy   Certificate of Status
     (Additional copy is   Certified Copy
     enclosed)   (Additional Copy
     is enclosed)

Mailing Address   **Street Address**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                              Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

A PLUS GLASS CORP.

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

P09000069332

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

ALELYN GLASS SERVICES, CORP

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

9104 NW 106 STREET

MEDLY , FL 33178

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

9104 NW 106 STREET

MIAMI, FL 33178

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent YANILL LOPEZ

9104 NW 106 STREET
(Florida street address)

New Registered Office Address: MEDLEY , Florida 33178
(City) *(Zip Code)*

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

same person

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.

Example:
X Change	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change _X_ Add ___ Remove	PS	MARIA OTERO	9104 NW 106 STREET MIAMI, FL 33178
2) ___ Change _X_ Add ___ Remove	VP	FELIX RUA	9104 NW 106 STREET MEDLEY, FLORIDA 33178
3) _X_ Change ___ Add ___ Remove	VP	YANILL LOPEZ	9104 NW 106 STREET MEDLEY, FL 33178
4) ___ Change _X_ Add ___ Remove	T	MARIA OTERO	9104 NW 106 STREET MEDLEY, FL 33178
5) ___ Change ___ Add ___ Remove			
6) ___ Change ___ Add ___ Remove			

E. If amending or adding additional Articles, enter change(s) here:
  (*attach additional sheets, if necessary).*   *(Be specific)*

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F. If an amendment provides for an 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*)

_____

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_____

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_____

The date of each amendment(s) adoption: APRIL 11, 2012

Effective date if applicable: APRIL 11, 2012

(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 APRIL 11, 2011

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)

MARIA OTERO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)