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12 SET -7 PH 4: 52

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### **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

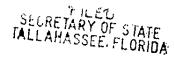
> P.O. Box 6327 Tallahassee, FL 32314

### A 7 GLASS CORP

NAME OF CORPORATION 200002312	20	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
JOSE A. ZALDI		
A Z GLASS CO	Name of Contact Person	
6100 NW 183 T	Firm/ Company	
HIALEAH, FL 33	Address Address	
	City/ State and Zip Code	
E-mail address: (to be use.  For further information concerning this matter, please	·	notification)
IOSE A. ZALDIVAR	<sub>at (</sub> 786	357-7784
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	rtment of State:
\$35 Filing Fee  \$\text{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	Amend Division	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of



# A Z GLASS CORP

12 SEP -7 PM 4: 52

120000 Stame of Corporation as currently filed with the F	lorida Dept. of State)
(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 adopts the following amendmen
Z GLASS & MIRRORS CORP	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or	n," "company," or "incorporated" or the abbreviation 'Co". A professional corporation name must contain the
word "chartered," "professional association," or the abbreviation '	6100 NW 183 TER.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	HIALEAH, FL 33015
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABOVE
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	ress in Florida, enter the name of the s:
Name of New Registered Agent	<del></del>
(Florida st	reet address)
New Registered Office Address: (City	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add	,	_		
Remove				
3) Change				
Add		<del></del>		
Remove				
4) Change				
Add		<del></del>		
Remove				
5) Change				
Add		_		
Remove				
Kemove				- · - · · · · · · · · · · · · · · · · ·
6) Change	-	_		
Add				
Remove				

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	ı

## 09/05/2012

The date of each amendmen 099	105/2 <del>012</del>
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
_	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 9/05/	2012
(By set	director, provided or other officer – if directors or officers have not been directors or officers have not been directors or officers have not been directors of the find of the fiduciary of the fiduciary)
,	JOSE A. ZALDIVAR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)