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COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR					
DOCUMENT NUMI	BER: P1400000074	6			
	of Amendment and fee are su				
Please return all corres	spondence concerning this ma	tter to the following:			
	DEIVIS PINHEIR	0			
		Name of Contact Person	1		
	DELTA TILE CORP				
		Firm/ Company			
	5406 5TH ST W				
		Address			
	LEHIGH ACRES	·			
		City/ State and Zip Code	3		
US	A1616@HOTMAI	L.COM			
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
DEIVIS PINH	IEIRO	at (239	851-1722		
Name (of Contact Person		de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	urtment 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)		
	ling Address		Address		
	endment Section sion of Corporations	Amendment Section Division of Corporations			
	Box 6327	Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Citallahassee, FL 32301					
		i allaha	ISSEE, TL <i>323</i> 01		



October 17, 2014

DEIVIS PINHEIRO DELTA TILE CORP 5406 5TH ST W LEHIGH ACRES, FL 33971

SUBJECT: DELTA TILE CORP Ref. Number: P14000000746

We have received your document for DELTA TILE CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 914A00022325



Articles of Amendment to . Articles of Incorporation of

DELTA TILE CORP

(
(Name of Corporation as currently filed with the Florida Dept. of State)	
0000746	
(Document Number of Corporation (if known)	

P1400000746				
(Document Number	of Corporation (if k	nown)		
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Fl</i>	orida Profit Corporation ad	opts the following	ng amendment(
A. If amending name, enter the new name of the	corporation:			
				_The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the	rp," "Inc," or "Co	o". A professional corpora	rated" or the d tion name must	abbreviation contain the
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET AL				_
			··	_
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	B <i>OX</i>)			
<u> </u>	,			- 8 - 4 - 8 - 4 - 8 - 4 - 8 - 8 - 8 - 8
			 	- الم
D. If amending the registered agent and/or regist new registered agent and/or the new registered		s in Florida, enter the nam	e of the	TORRESTA
Name of New Registered Agent				<u>م</u> آوَدَ
	(Florida street	address)		
New Registered Office Address:	(City)	, Florida_		_
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing R		J J	<i>Cal</i>	
I hereby accept the appointment as registered agent	. 1 am jamiliar wil	n ana accept the obligations	oj ine position.	
		10.1		

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 <math>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	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	OF		CARLOS A. DE SOUZA	3814 SE 3RD PLACE
Add				CAPE CORAL
Remove				FLORIDA,33904
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				·
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	(Be specific)
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- ,, . ,	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and ament if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

The date of each amendmen	t(s) adopțion: 10/05/2014	, if other than the
date this document was signed	1.	
Effective date if applicable:	10/05/2014	
Enecuve date in applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	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 vote	s cast for the amendment(s) was/were sufficient for approval	
by	,	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_10/0	05/2014	
Signature	The three	
<u>(</u> I	By a director, president or other officer - if directors or officers have not been	
Si a	elected, by an incorporator — if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
"		
	DEIVIS PINHEIRO	
	(Typed or printed name of person signing)	
	Chief Financial Officer	
	(Title of person signing)	