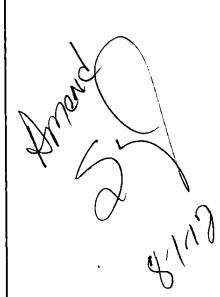
(Re	questor's Name)	··· ==
(Ad	dress)	<u>.                                    </u>
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<del>= #)</del>
DEICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

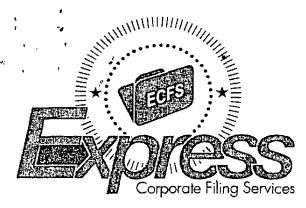


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1000 Ponce de Leon Blvd. Suite: 101 Coral Gables, FL 33134

Phone: 305 444 4994

Email- filing@ecfsfiling.com

FFICE	USE ONLY	

## CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

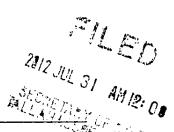
1. C. TILE COPPORO (Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
 (Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
Walk in Pick up time	Certified Copy	
Mail out Will wait	Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	
Profit	J Amendment	
	Resignation of R.A., Officer/ Director	
NonProfit	Resignation of R.A., Officer/ Director	
	Resignation of R.A., Officer/ Director  Change of Registered Agent	
NonProfit Limited Liability Domestication		

200	OTHER FILNGS
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials		
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## Articles of Amendment to Articles of Incorporation of



(Zip Code)

## M.C. TILE CORPORATION

M.C. TILE CORPORATION	1954.在在1960年上,1954年1960年上,1954年1960年1960年1960年196日
(Name of Corporation as currently filed with	the Florida Dept. of State)
P93000066023	The state of the s
(Document Number of Corporat	tion (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation	on:
	The new
	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the attion "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
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	
(Flori	ida street address)
New Provintered Office Addressis	Dispide

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.

Signature of New Registered Agent, if changing

(City)

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	$\underline{\mathbf{v}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	V	ELVIRA C RUBIO	2174 SW 25TH TERRACE
Add			MIAMI, FL 33133
X Remove			
2) Change	بريد <del>الله المساورة ا</del>		
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change	<u> </u>		
Add			
Remove			
6) Change	······································		
Add			-
Remove			

If amending or adding add (Attach additional sheets, if	necessary).	(Be specific,	The state of the s			
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	<del></del>					
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<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	<del></del>					
<b>T</b>		•		11 (1 61		
If an amendment provides provisions for implement	ing the amer	ange, reciassindment if not	nication, or ca contained in t	ncellation of is he amendmen	sued snares. t itself:	
(if not applicable, indi	icate N/A)					
ORIS A. VEGA	100%	SHARE	<u>S</u>			
			<del></del>			
						<u></u>
			····			
				<del>,,, , , , , , , , , , , , , , , , , , </del>		

The date of each amendment(s) ad	Deption: JULY 26,2012
Effective date <u>if applicable</u> : JU	_Y 26,2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su:	ited by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved 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	or the amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were ado action was not required.	sted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	sted by the incorporators without shareholder action and shareholder
Dated JULY 2	6,2012
Signature	Ottegas
selected	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)
	MORIS A. VEGA
	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of noncon similar)