

(Re	questor's Name)			
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(Cit	y/State/Zip/Phone	: #)		
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(Bu	siness Entity Nan	ne)		
(Document Number)				
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:		:		

Office Use Only



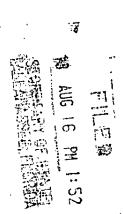
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AUG 15 2013

R. WHITE





August 8, 2013

ERIC SCHERR ATLANTIC MACHINERY & PARTS INC PO BOX 142 HOBE SOUND, FL 33475

Ref. Number: P9000050026

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document number of the name conflict is V65246.

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.

Rebekah White Regulatory Specialist II

Letter Number: 813A00019066



August 8, 2013

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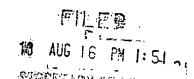
Letter Number: 813A00019066

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Atlantic Ma	chinery & Parts,	Inc.
	_{ER:} P900050026		
	f Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
<u> </u>	Eric Scherr		
		Name of Contact Person	1
,	Atlantic Machiner	y, Inc.	
		Firm/ Company	
<u> </u>	P.O. Box 142		
_		Address	
_	Hobe Sound, Flo	rida 33475	
		City/ State and Zip Cod	e
enze	o74@aol.com		
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Eric Scherr		at (305	, 793-6601
Name of	Contact Person		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)
Amer Divis P.O. I	ng Address Idment Section Idment Sec	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



Atlantic Machinery & Parts, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) P98000050026

(Document Number of Corporation (if known)

nt(s) to

The n
" or "incorporated" or the abbreviati sional corporation name must contain i
enter the name of the
, Florida
(Zip Code)

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)	Title	Name	<u>Addres</u> s
1) Change	_		
Add			
Remove			
2) Change	<u></u>		
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheet	additional Art ts, if necessary).					
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f an amendment pro- provisions for imple (if not applicable	menting the am	:hange, reclass endment if no	ification, or ca contained in t	ncellation of i he amendmer	ssued shares at itself:	1
					· .	. ,

The date of each amendment(s) adoption: date this document was signed.	, if other than the
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	
 ☐ 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 08/02/2013	
Signature Wellung	
(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)	
Exic Schell (Typed or printed name of person signing)	_ .
President	
(Title of person signing)	_