AUG/02/2017/WED 02:29 PM

Division of Corporations

389324

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P. 001

## Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name : ARTURO YERO P.A. Account Number : I20150000125 Phone : (305)444-0884 Fax Number : (305)444-0786

#\*Enter the email address for this business-entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: ar Turoyero (2 yerdlaul COR AMND/RESTATE/CORRECT OR O/D RESIGN 5 SCHNUPP MANUFACTURING CO., INC. Certificate of Status Û t 0 Certified Copy Page Count 05 5 Estimated Charge \$35.00 AUG 03 2017 Electronic Filing Menu **Corporate Filing Menu** Help

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17/WED 02:29 PM !	PAA NO.	P. 002
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	Articles of Amendment	
1	Articles of Incorporation of	
SCHNUPP MANUFACTURING CO.		AUG A OT
	te of Corporation as currently filed with the Florida D	Pept. of State)
389324		
	(Document Number of Corporation (if known)	.بَع
Pursuant to the provisions of section 60 its Articles of Incorporation:	07.1006, Florida Statutes, this Florida Profit Corporation	adopts the following amendment
A. If amending name, enter the new	the transmission of the service of t	
	Hane of the Corporation:	
name must be distinguishable and co	ontain the word "corporation," "company," or "inco.	The new porated" or the abbreviation
"Corp.," "Inc.," or Co.," or the design word "chartered," "professional associ		oration name must contain the
B. Enter new principal office address (Principal office address <u>MUST BE A</u> )	street Address	<b></b>
	1	
C. Enter new mailing address, if ann	Kenble-	
C. <u>Enter new mailing address, if app</u> (Mailing address <u>MAY BE A POST</u>	licable; OFFICE BOX	
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C. <u>Enter new mailing address, if app</u> (Mailing address <u>MAY BE A POST</u>	licable; OFFICE BOX	
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(Mailing address <u>MAY BE A POST</u> D. <u>If amending the registered agent and</u> <u>new registered agent and/or the ne</u> <u>Name of New Registered Agent</u> <u>New Registered Agent's Signeture 16 of</u>	OFFICE BOX         ad/or registered office address in Florida, enter the na         w registered office address:         Cesar Correa         2113 NW 17 Ave         (Florida streat address)         Miami	Florida_33142 (Zlp Code)
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FAX No.

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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: ł

<u>X</u> Change	PI	John Doe	
X Remove	¥	Mike Jones	
bbA X_	<u>sv</u>	Saliy Smith	
<u>Type of Action</u> (Check One)	Title	Name -	Address
1) Change	PIS	Cesar Correa	2113 NW 17 Ave
X Add			Miami Florida 33142
Remove			
2) Change	P	Leo E. Schnupp Jr.	7900 N.W. 181 ST.
Add			MIAMI, FL 33015
X Remove			
3) Change	D	ERIC SCHNUPP	7900 N.W. 181 ST.
Add		: · :	MIAMI, FL 33015
Remove			
4) Change	D	CAMILO CORREA	2113 NW 17 AVE
Add		-	Miami FL 33142
Remove			
5) Change			
Add			
6) Change			
Add		· · · · · · · · · · · · · · · · · · ·	
Remove			
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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 provider for an exchange, reclassification, or cancel provisions for implementing the amendment if not contained in the a	ation of issued shares.
F. If an aneudment providet for an exchange, reclassification, or cancel provisions for implementing the amendment if not contained in the a (if not applicable, indicate N/A)	lation of issued shares. mendment itself:
	inendment itself:
	lation of issued shares, mendment isself:
	inendment itself:
	inendment itself:
(if not applicable, indicate N/A)	

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			H 17000 JU2479
The date of each amendment date this document was signed		i	, if other than the
Effective date <u>if applicable</u> :			
	(no more than 90	days after amendment j	Ale daie)
Note: If the date inserted in a document's effective date on th	this block does not meet the applica he Department of State's records.	ble statutory filing requ	frements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)		
The amcadment(s) was/wen by the shareholders was/we	e adopted by the shareholders. The name sufficient for approval.	umber of votes cast for	the amendment(s)
The amendment(s) was/were must be separately providen	e approved by the shareholders throug d for each voting group entitled to vo	sh voting groups. The f ite separately on the am	ollowing statement endment(s):
"The number of votes	cast for the amendment(s) was/were	sufficient for approval	
by		<u>م</u>	
	(voting group)		
The amendment(s) was/were action was not required.	adopted by the board of directors wi	itbout shareholder action	n and sharebolder
sele	Active to the president or puter officer extended by an incorporator - if in the he	- if directors or officers	have not been
app	cointed fiduciary by that fiduciary)		
app	CESAR CORREA		
app	CESAR CORREA (Typed or primed name		
apç	CESAR CORREA (Typed or primed name PRESIDENT	ve of person signing)	
abb	CESAR CORREA (Typed or primed name PRESIDENT	erson signing)	