L53417

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08/26/11--01008--011 **35.00



and for

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: E.G. USED TR	UCK PARTS INC.			
DOCUMENT NUMBER: L - 5341	7			
The enclosed Articles of Amendment and fee are submitted for	filing.			
Please return all correspondence concerning this matter to the f	Collowing:			
Name of Contact Per	rson			
E.G. USED TRUCK Firm/Company	PARTS INC			
• •				
12871 ALEXANDR	IA DRIVE			
Address				
OPA LOCKA FC City/ State and Zip C	33054			
City/ State and Zip C	ode			
E-mail address: (to be used for future annual r	o · com report notification)			
For further information concerning this matter, please call:				
Edelio Gonzalez at (305) 794.6086				
	Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the	he Florida Department of State:			
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified C (Additional)				
Mailing Address Street Add Amendment Section Amendmen				
	t Section Corporations			
P.O. Box 6327 Clifton Buil	•			
	tive Center Circle			

Articles of Amendment to Articles of Incorporation of

E. G. US.	ED TRUCK PARTS	s inc	
(Name of Corporation as curr	ently filed with the Florida	Dept. of State)	
	-53417		
(Document Nur	mber of Corporation (if know	vn)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this Flo	orida Profit Corporation ad	opts the following
A. If amending name, enter the new name o	f the corporation:		
agence are the distinct to the terms of the	41	<i>a</i>	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc,	" or "Co". A professional	ea or the corporation
B. Enter new principal office address, if app	olicable:		_
(Principal office address <u>MUST BE A STREE</u>	ET ADDRESS)		
		***	,w
C. Enter new mailing address, if applicable	• •		
(Mailing address MAY BE A POST OFFI			- 15 T
			FILED 26 AM
			A B
D. If amending the registered agent and/or i	registered office address in	Florida, enter the name of	10
new registered agent and/or the new regis	stered office address:	1 to 1 to a control of the traine of	22
Name of New Registered Agent:			
New Registered Office Address:	(Florida street ad	ldress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changir	ng Registered Agent:		
hereby accept the appointment as registered a	gent. I am familiar with and	d accept the obligations of th	e position.
S	ignature 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)

<u>Title</u> .	Name	Address	Type of Action
PST	Juan C. Olive		☐ Add ☐ Remove
<u>PST</u>	EDELLO GONZALEZ		Add Remove
		NA	·
	·		
provisio	nendment provides for an exchange, reports for implementing the amendment in ot applicable, indicate N/A)	eclassification, or cancellar from the am	ation of issued shares, endment itself:

The date of each amendment(s	adoption: 8/31/2011	
Effective date <u>if applicable</u> : _	(date of adoption is required)	
enective date <u>ii applicable</u> .	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	ndment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	77	
(°	voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sh	areholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareh	older
Dated	8/21/2011	
Signature		
select	director, president or other officer – it directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or othe nted fiduciary by that fiduciary)	
	Juan C. OLIVE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	