m82352

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08/31/05--01005--020 **35.00



aprila Amena



Southern Industrial Tire of South Fla., Inc.

2995 N.W. 76 Street Miami, Florida 33147 Tel. (305) 696-6727 Fax (305) 696-1711

Miami, 08/29/05

FLORIDA DEPARTMENT OF STATE AMENDMENT SECTION Att.: Mrs. Susan Tayne DIVISION OF CORPORATIONS 409 E. GAINES STREET TALLAHASSEE, FL 32399

Dear Mrs. Susan Tayne,

In attachment I included my payment for the filing fee of us\$35,- for the amendment of Southern Industrial Tire of South Florida.

I also included the form again.

Susan, I want this resolved a soon as possible since I need to have access to my bank account.

Thank you for your help and understanding.

Best regards.

Koen Roel of hour General Manager Export

Southern Industrial Tire of South Florida

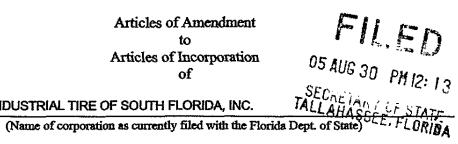
Tel.: +1-786-251-6684

E-mail: koen.roelens@solidealexport.com

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF C	CORPORATION: SOUTHERN INDU	STRIAL TIRE OF SOUTH FLORIDA, INC	· · ·
DOCUMEN	F NUMBER: M82352		·
The enclosed	Articles of Amendment and fee are s	submitted for filing.	
Please return	all correspondence concerning this n	natter to the following:	
	KOEN ROELENS		
	(Name of C	Contact Person)	-
	SOUTHERN INDUSTRIAL TIRE OF SO		_
	(Firm/	Company)	
	2995 NW 76th STREET	(August)	_
	(Ac	idress)	
	MIAMI, FLORIDA, 33147		_
	(City/ State/	and Zip Code)	-
For further in	formation concerning this matter, ple	ase call:	
KOEN ROELE		at (305) 696 1076	
	(Name of Contact Person)	(Area Code & Daytime Telephone	Number)
Enclosed is a	check for the following amount:		
☑ \$35 Filing Fe	e ☐ \$43.75 Filing Fee & Certificate of Status	Certified Copy Cert (Additional copy is Cert enclosed) (Ad	50 Filing Fee difficate of Status diffied Copy ditional Copy enclosed)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	



SOUTHERN INDUSTRIAL TIRE OF SOUTH FLORIDA, INC.

M82352

(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
N/A
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
PLEASE ADD DIRECTOR:
ROELENS, KOEN
2001 ATLANTIC SHORES BLVD #517
HALLANDALE, FLORIDA, 33009
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provising for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate
N/A

(continued)

The date of each amendment(s) adoption: 08/05/2005				
Effective date if applicable: 08/08/2005				
(no more than 90 days after amendment file date)				
Adoption of Amendment(s) (CHECK ONE)				
☐ The amendment(s) was/were approved 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				
(voting group)				
☐ 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.				
Signed this 06th day of AUGUST 2005				
(By a director, president or other officer - if directors of afficers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
OLIVIER HUBRECHT (Typed or printed name of person signing)				
<u>BENERA MANABER LATIN-</u> AMERICA, (Title of person signing)				

FILING FEE: \$35