

# Florida Department of State Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations Fax Number : (850)205-0380

From:

Account Name : FAS-T CORF. 2 Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-034

: FAS-T CORP. AGENTS, INC. : 071001002335 : (305)599-0839 : (305)716-0346



# **BASIC AMENDMENT**

MATEQ SUPPLY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
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#### ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF <u>MATEQ SUPPLY, INC:</u> (PRESENT NAME)

Pursuant to the provisions of section 607.10006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted (indicate article(s) number(s) being amended, added or deleted

## Change ARTICLE I - NAME AND ADDRESS

The name of this corporation is MATEQ SUPPLY, INC., with its principal office at 8081 nw 36 street Suite 301, Miami, Florida, 33166.

### Change ARTICLE IV CAPITAL STOCK

This Corporation is authorized to issue seven thousand five hundred (7,500) shares of one dollar (\$1.00) par value common stock which shall be distributed as it continues :

PEDRO SALAS I.D. # 5420-672-52-425-0 8081 NW 36 STREET, SUITE 301 MIAMI, FLORIDA. 33166.

VERONICA SALAS 1.D. # \$420-864-79-955-0 8081 NW 36 STREET, SUTTE 301 MIAMI, FLORIDA, 33166.

MARIA SALAS I.D. # 5420-557-57-607-0 8081 NW 36 STREET, SUITE 301 MIAMI, FLORIDA. 33166.

FABIOLA SALAS I.D. # S420-240-83-799-0 8081 NW 36 STREET, SUTTE 301 MIAMI, FLORIDA, 33166,

1875 shares

1875 shares

1875 shares

5 PM

1875 shares

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## Change ARTICLE VI REGISTERED OFFICE AND AGENT

The street address of the registered office and the name of the Registered Agent of this corporation shall be :

#### VERONICA SALAS 8081 NW 36 street, suite 301 Miami, Florida. 33166.

# Change ARTICLE VII BOARD OF DIRECTORS

The Board of Director shall consist of a total of Three (03) person, and the name and address of the person who is to serve as director is ;

PEDRO SALAS 8081 NW 36 STREET, SUTTE 301 MIAMI, FLORIDA, 33166.

# PRESIDENT

VERONICA SALAS 8081 NW 36 STREET, SUITE 301 MIAMI, FLORIDA. 33166.

SECRETARY

VICE-PRESIDENT

MARIA SALAS 8081 NW 36 STREET, SUITE 301 MIAMI, FLORIDA, 33166.

SECOND: if an amendment provides for an exchange, reclassification or cancellation of issued share, provisions for implementing the amendment if not contained in the amendment itself, are as follows.

THIRD: The date of each amendment's adoption: \_\_\_\_\_\_IANUARY 29, 2002 \_\_\_\_\_\_ FOURTH: Adoption of Amendment(s) ( CHECK ONE).

(X) The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) 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 director without shareholder Action and shareholder action was not required.

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() The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 29 Day of JANUARY 2.002. Signature

(BY the Chairman or vice chairman of the Boar of Directors, President or other officer if adopted by the shareholders)

OR (By a director if adopted by the directors) OR (By an incorporator if adopted by the incorporators)

# PEDRO SALAS

PRESIDENT TIFLE

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## REGISTERED AGENT / REGISTERED OFFICE.

I am accepting to be the Registered Agent for MATEQ SUPPLY, INC.

The name of the corporation is: MATEO SUPPLY, INC.

The name and address of the registered agent and office is

#### VERONICA SALAS NAME

8081 NW 36 STREET SUITE 301 (ADDRESS)

#### MIAMI, FLORIDA 33166 (CITY/ STATE/ ZIP/ CODE)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS AND CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED.

Signature . VERONICA SALAS DATE: JANUARY 30/2002

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