

PO10000 28442

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(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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100180712321

07/09/10--01037--004 **17.50

06/03/10--01008--026 **35.00

FILED

10 JUL - 9 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 CC
1 CUS

52.50 total

Amend
OFF 7/13



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 24, 2010

ROSA E. URIARTE
COREL USA COMPONENTS INC.
10114 43RD WAY NORTH
PEMBROKE PARK, FL 33782

SUBJECT: COREL USA COMPONENTS INC.
Ref. Number: P01000028442

We have received your document for COREL USA COMPONENTS INC. and check(s) totaling \$17.50. However, your check(s) and document are being returned for the following:

We are returning your check for \$17.50 to be replaced by one in the correct amount of \$52.50.

The date of adoption of each amendment must be included in the document.

IN YOUR COVER LETTER YOU SAY THAT \$35.00 WAS ALREADY SUBMITTED. WHEN AND WITH WHAT DOCUMENT WAS IT SUBMITTED. WE HAVE NOTHING PENDING UNDER THIS CORPORATION.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

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) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 010A00015625

Fax 850 - 245 - 6897

RECEIVED
2010 JUL -1 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: COREL USA COMPONENTS INC

DOCUMENT NUMBER: P 01000028442

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROSA E URIARTE
Name of Contact Person

COREL USA COMPONENTS INC
Firm/ Company

10114 43rd way N
Address

P. Park FL 33782
City/ State and Zip Code

milleya@corelusa.com
E-mail address: (to be used for future annual report notification)

RECEIVED
2010 JUN 21 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call: 727-686-7918 cel
ROSA E URIARTE at (727) 579-9201 office
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy
(Additional copy is enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed) |
|--|---|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

\$35.00 sent
\$17.50 enclosed

Articles of Amendment
to
Articles of Incorporation
of

CORE USA COMPONENTS

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

P 01000028442

(Document Number of Corporation (if known))

FILED
10 JUL -9 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

10114 43rd Way N
P. Park
FL 33782

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida
(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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)

Title	Name	Address	Type of Action
Pres.	ROSA E URIARTE	10114 43rd Way N P. Park FL 33782	<input type="checkbox"/> Add <input type="checkbox"/> Remove
VP	MARIE A. RIVERA	5115 Redleaf Forest Ln KATY TX 77494	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 6-17-10

(date of adoption is required)

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 Rosa E. Uriarte
(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.

Dated 6-17-10

Signature Rosa E. Uriarte

(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)

ROSA E. URIARTE
(Typed or printed name of person signing)

Pres.
(Title of person signing)