Division of Corporations



Florida Department of State

Division of Corporations

Electronic Eiting Cover Sheet

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(((H160002774523)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

mail Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ECOA INDUSTRIAL PRODUCTS, INC.

Certificate of Status	0
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Page Count	06
Estimated Charge	\$35.00

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TO: Amendment Section Division of Corporations

COVER LETTER

NAME OF CORPORATION: ECOA INDUSTRIAL PRODUCTS, INC. DOCUMENT NUMBER: P01000069475			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	STEPHEN KONOP		
•		Name of Contact Person	L CONTRACTOR
	ECOA INDUSTRIAL PROD	OUCTS, INC.	
-		Firm/ Company	
	5051 NW 37 TH AVE		
•		Address	
	MIAMI, FJ. 33142		•
•		City/ State and Zip Code	
SWK	ONOP@AOL.COM		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
STEPHEN KONOP		at (954	de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fec & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi: P.O.	ing Address indiment Section sion of Corporations Box 6327 thassec, FL 32314	. Amend Divisio Clifton 2661 E	Address ment Section of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation

(Name of Corporation	on as currently filed with the Florida Dept, of State)
P01000069475	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the co	prporation;
37TH AVE MANUFACTURING, INC.	The new
came must be distinguishable and contain the word 'Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the designation of the designati	d "corporation," "company," or "incorporated" or the abbreviation ," "Inc." or "Co". A professional corporation name must contain the abbreviation "P.A."
. If amending the registered agent and/or register- new registered agent and/or the new registered of	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
·	
	(Florida street oddress)
New Registered Office Address:	(City) (Tip Code)
lew Registered Agent's Signature, if changing Regi hereby accept the appointment as registered agent. I	vistered Agent: I am familiar with and accept the obligations of the position.
Signa	ature 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)

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 Doc 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.

X Change	PT	John Doe		
X Remove	Y	Mike Jones		
X Add	SY	Sally Smith		
Type of Action (Check One)	Title	Name		Address
1) Change				
Add				
Remove				
2) Change				hatt
Add				
Remove				
3)Change		·		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		-	· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				v

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f amending or adding additional Arti Attach additional sheets, if necessary).	(Re specific)
<u> </u>	
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
	

The date of each amendment(s) as	deption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will partment of State's records.	l not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(a) efficient for approval.	•
	proved by the shareholders through voting groups. The following statement 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	, 14	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	J31,2016	
Signature		
selecte	irector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court tod fiduciary by that fiduciary)	
	STEPHEN KONOP	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	