

P03000089614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

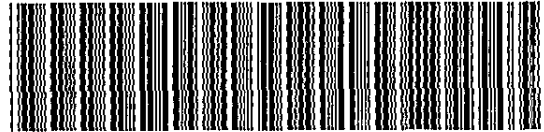
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000061674560

11/28/05--01028--022 \*\*35.00

FILED  
05 NOV 28 PM 2:40  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DEC 01 2005

Men

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** TOTAL INDUSTRIAL EQUIPMENTS & PARTS CORP.

**DOCUMENT NUMBER:** P03000089614

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

Please return all correspondence concerning this matter to the following:

ADIB BALLIA

(Name of Contact Person)

C/O ANGEL D. CORDOVA & CO.

(Firm/ Company)

780 NW 42 AVE. #416

(Address)

MIAMI FL 33126

(City/ State and Zip Code)

For further information concerning this matter, please call:

ANGEL D. CORDOVA

(Name of Contact Person)

at ( 305 ) 444-5511

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$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

Articles of Amendment  
to  
Articles of Incorporation  
of

TOTAL INDUSTRIAL EQUIPMENTS & PARTS CORP.

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

FILED  
05 NOV 28 PM 2:40  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

P03000089614

(Document number of corporation (if known))

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

**NEW CORPORATE NAME (if changing):**

(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(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

**ARTICLE II: ADDRESS OF CORPORATION:**

**THE NEW ADDRESS AND MAILING ADDRESS SHOULD BE:**

780 NW 42 AVE. #416, MIAMI, FL. 33126

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: NOVEMBER 7, 2005

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment is a 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.

Signature X

Adib Ballia  
(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)

ADIB BALLIA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35