

PO 90000 33928

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(City/State/Zip/Phone #)

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2009 SEP -4 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

9.15.09

Amend  
SL

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Ametal Steel, Inc.

DOCUMENT NUMBER: P09000033928

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

Please return all correspondence concerning this matter to the following:

Aurora Penálver, Esq.  
Name of Contact Person

Penálver & Penálver, P.A.  
Firm/ Company

2655 LeSane Rd., Suite 508  
Address

Coral Gables, FL 33134  
City/ State and Zip Code

na.penalver.law@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aurora Penálver, Esq. at (305) 579-9000  
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 checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status, Certified Copy<br>(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

Cometal Steel, Inc.

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

PO9000033928

(Document Number of Corporation (if known))

FILED  
2009 SEP -4 AM 10:28  
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**)

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
VP	<del>Roberto HACHE ACTA</del>	<del>2155 LeFevre Rd</del>	<input type="checkbox"/> Add
	<del>Roberto HACHE ACTA</del>	<del>Suite 508</del>	<input type="checkbox"/> Remove
		<del>Coral Gables, FL 33134</del>	
VP	Robelio Fernandez	2155 LeFevre Rd	<input checked="" type="checkbox"/> Add
		Suite 508	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	
S	Roberto HACHE ACTA	2155 LeFevre Rd	<input checked="" type="checkbox"/> Add
	<del>Roberto HACHE ACTA</del>	<del>Suite 508</del>	<input type="checkbox"/> Remove
		<del>Coral Gables, FL 33134</del>	

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

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**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)

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The date of each amendment(s) adoption: 9-1-09  
(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 \_\_\_\_\_"  
(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 9/01/2009

Signature \_\_\_\_\_

(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)

CARLA HACHE  
(Typed or printed name of person signing)

\_\_\_\_\_  
(Title of person signing)