

P10000014402

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number: (850) 617-6380

From: Account Name: MAS TAX AND ACCOUNTING INC.
Account Number: I20080000059
Phone: (305) 227-7210
Fax Number: (305) 227-4240

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11 AUG 15 AM 9:55
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
FLORIDA EXPORT PARTS INC**

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Electronic Filing Menu

Corporate Filing Menu

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Handwritten signature and date 8/24/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FLORIDA EXPORT PARTS INC.

DOCUMENT NUMBER: P10000014402

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

Please return all correspondence concerning this matter to the following:

Ada Estrada

Name of Contact Person

MAS Tax & Accounting Services Inc

Firm/ Company

14263 SW 42nd Street

Address

Miami, FL 33175

City/ State and Zip Code

MASTAXACCOUNTING@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADA ESTRADA

Name of Contact Person

at (305)

227-7210

Area Code & Daytime Telephone Number

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

☒ \$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

FLORIDA EXPORT PARTS INC

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

P10000014402

(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:

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**)

14300 COSTA DEL SOL

BOULEVAR

DORAL, FL 33178.

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

14300 COSTA DEL SOL

BOULEVAR

DORAL, FL 33178.

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

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11 AUG 15 AM 9:55

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."

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input 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)

ARTICLE II

NEW PRINCIPAL BUSINESS ADDRESS AND MAILING ADDRESS:

14300 COSTA DEL SOL BOULEVARD, DORAL FL 33178

ARTICLE V : REGISTERED AGENT ADDRESS:

14300 COSTA DEL SOL BOULEVARD, DORAL FL 33178

ARTICLE VI: INCORPORATOR ADDRESS:

14300 COSTA DEL SOL BOULEVARD, DORAL FL 33178

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: 8/15/2011

Effective date if applicable: 8/15/2011 (date of adoption is required)
(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 8/15/2011

Signature

Daniela Matute

(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)

DANIELA MATUTE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)