P100000 58159

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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: SIGMA H	QUIPMENT COMPANY
DOCUMENT NUMBER: P1000005875	9
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concernin .	g this matter to the following:
RAUL J. EIRIS	
SIGMA EQUIPME	Name of Contact Person NT COMPANY
	Firm/ Company
7400 NW 79TH AV	1 1
	Address
MIAMI, FL 33166	1
	City/ State and Zip Code
REIRIS@SIGMAEQUIP	MENTCO.COM
_	(to be used for future annual report notification)
For further information concerning this ma	tter, please call:
RAUL J. EIRIS	at (786) 237-0979 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	ant made payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Certificate of	- r
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

SIGMA EQUIPMENT COMPANY

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(Name of	Corporation as currentl	v filed with the Florida Dept. of State)	FILED
P10000058759		1	
	Document Number o	: f Corporation (if known)	
	(Bocament Namber of	Corporation (in known)	819 KAY 14 P @ 3
Pursuant to the provisions of section 607.10	06, Florida Statutes, this		
ts Articles of Incorporation:			L P. Gert II W. LLAHASSE: PEUR
		· ·	ALLAHASSEE: FEUR
A. If amending name, enter the new name	e of the corporation:	,	
			Tri
ame must be distinguishable and contain	'n the word "comparatio	P "company" or "incomparated" or	The new
'Corp.," "Inc.," or Co.," or the designal			
vord "chartered," "professional association			
3. Enter new principal office address, if			
Principal office address <u>MUST BE A STR</u>	(EET ADDRESS)	1	
		l ————	
Enter new mailing address, if applica	ble:		
(Mailing address MAY BE A POST OF			
		l -	
D 16 din - 4bi d d d -			
 If amending the registered agent and/ new registered agent and/or the new in 			
new jeg.wered agent and or the new	ELIACITU OFFICE AUGUSTS	`	
Name of New Registered Agent	<u> </u>	<u> </u>	
	.0		
	(Florida str	eèt address)	
New Registered Office Address:		, Florida	
New Negistered Office Address.		(City)	(Zip Code)
		, 43,	The state of
ew Registered Agent's Signature, if cha			
hereby accept the appointment as register	åd agent. – Lum familiar v	vith and accept the obligations of the posi	tion,
-3			
-3	Signature of New R	egistered Agent, if changing	
		- amily considered	
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		1.	
	Page 1	of 4	

If amending the Office address of each Officer (Attach additional sheet	and/or D	Director		me of each office	r/director being removed and title, name, and
			first letter of the office titl	lė:	
P = President; V= Vice Executive Officer; CFO held, President, Treasur Changes should be note	President = Chief if er, Directed in the fo aves the c	t: T= Tr Financia or would llowing corporati	easurer; S= Secretary; D l Officer. If an officer/di l be PTD. manner. Currently John to on, Sally Smith is named	# Director; TR= rector holds more Doe is listed as the	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John D	<u>oc</u>		
X Remove	<u>v</u>	Mike J	ones		
X Add	<u>SV</u>	Sally S	mith) }	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change	S	_	ANNALIE VALIDO		7400 NW 79TH AVENUE
Add				1	MIAMI, FL 33166
X Remove				1	
2) Change	UP		CARLOS E. GALLAR	DO	7400 NW 79TH AVENUE
Add				,	MIAMI, FL 33166
X Remove				1	
3) Change					
Add				•	
Remove					
1) Change		_		_ .	
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5) Change		_			
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Attach additional sheets, if necessary).	icles, enter change(s) her (Be specific)	
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The date of each amendment(s) adop date this document was signed.	tion:, if other than th
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this date will not be listed as the timent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes east for the amendment(s) ient for approval.
	by the shareholders through voting groups. The following statement the voting group entitled to vote separately on the amendment(s):
"The number of votes east for	the amendment(s) was/were sufficient for approval
by	<u> </u>
	(voting group)
☐ The amendment(s) was/were adopted action was not required.	d by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators without shareholder action and shareholder
05/08/2019 Dated	
Signature	'A l: m.
(By a direc selected, b	tor, president or other officer — if directors or officers have not been y an incorporator — if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
RA	UL J. EIRIS
	(Typed or printed name of person signing)
DII	RECTOR
_	(Title of person signing)

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