P10 0000 58759

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COVER LETTER

· Election .

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION: SIGMA EQUIPMI	ENT COMPANY	
DOCUMENT NUMI	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	RAUL J. EIRIS		
		Name of Contact Persor	1
	SIGMA EQUIPMENT COM	IPANY	
		Firm/ Company	
	7400 NW 79TH AVENUE		
		Address	
	MIAMI, FL 33166		
		City/ State and Zip Code	2
Rank	eiris@gmail.com		
		sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
		at (_)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SIGMA EQUIPMENT COMPANY

(Name o	of Corporation as currently filed with the Florida Dept. of State)
P10000058759	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new na	me of the corporation:
	The new tain the word "corporation," "company," or "incorporated" or the abbreviation attion "Corp," "Inc," or "Co". A professional corporation name must contain the tion," or the abbreviation "P.A."
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida, enter the name of the wregistered office address:
Name of New Registered Agent	RAUL J. EIRIS
Nume of New Registered Agent	7400 NW 79TH AVENUE
	(Florida street address)
New Registered Office Address:	MIAMI, Florida 33166
The state of the s	(City) (Zip Code)
New Registered Agent's Signature, if c. I hereby accept the appointment as regist	hanging Registered Agent: Pered 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, 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 = (Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each a held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. The 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 ChaMike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change		_			
Add					
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
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5) Change					
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The date of each amendment(s) adoption:	, if other that
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed a
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes case by the shareholders was/were sufficient for approval.	t for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the	The following statement e amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for appro-	oval
by	·"
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	on and shareholder
06/06/2019 Dated	
Signature All. m	
(By a director, president or other officer – if directors or o selected, by an incorporator – if in the hands of a receiver appointed fiduciary by that fiduciary)	
RAUL J. EIRIS	
(Typed or printed name of person signi	ng)
DIRECTOR	
(Title of person signing)	