

8/27/2014

Division of Corporations

P12000011827  
Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : GENERAL SOLUTIONS INC  
Account Number : 120140000086  
Phone : (305) 255-3310  
Fax Number : (305) 355-3320

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Cape10@grupois.com.do.

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14 SEP -2 PM 12:36

DIVISION OF CORPORATIONS  
TALLAHASSEE FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
INDUSTRIAS SAN MIGUEL USA CORP

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

C. LEWIS

SEP 3 2014

EXAMINER

09/01/2014 10:35PM FAX 3052553320  
8/27/2014

GENERAL  
Division of Corporations

0002/0007

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Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: INDUSTRIAS SAN MIGUEL USA CORP

DOCUMENT NUMBER: P12000011827

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

Please return all correspondence concerning this matter to the following:

BLANCA ZACARIAS

Name of Contact Person

GENERAL SOLUTIONS INC

Firm/ Company

13205 SW 137TH. AVE SUITE 113

Address

MIAMI, FL 33186

City/ State and Zip Code

BLANCA@GENERAL-SOLUTIONSINC.COM

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

For further information concerning this matter, please call:

BLANCA ZACARIAS

Name of Contact Person

at (305) 255-3310

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  
2461 Executive Center Circle  
Tallahassee, FL 32301

FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONSArticles of Amendment  
to  
Articles of Incorporation  
of

14 SEP -2 AM 10:41

## INDUSTRIAS SAN MIGUEL USA CORP

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

P12000011827

(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)\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**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 \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (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)

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 = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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. There is 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 Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

| Type of Action<br>(Check One)                                                                                    | Title | Name                  | Address                                                       |
|------------------------------------------------------------------------------------------------------------------|-------|-----------------------|---------------------------------------------------------------|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | CEO   | OLIVER MILLER         | 10775 NW 21 ST<br>SUITE 130<br>MIAMI, FL 33172                |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | CEO   | JORGE R ANANOS JERI   | LA ENCALADA 197<br>SANTIAGO DE SURCO<br>LIMA, LI LIMA 2, PERU |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | CEO   | TANIA ALCAZAR DE ANAN | LA ENCALADA 197<br>SANTIAGO DE SURCO<br>LIMA, LI LIMA 2, PERU |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | CEO   | JORGE H ANANOS ALCAZ  | LA ENCALADA 197<br>SANTIAGO DE SURCO<br>LIMA, LI LIMA 2, PERU |
| 5) <input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | CEO   | ARTURO MARROQUIN      | LA ENCALADA 197<br>SANTIAGO DE SURCO<br>LIMA, LI LIMA 2, PERU |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |       |                       |                                                               |

[illegible][illegible]

STATE OF FLORIDA  
DEPARTMENT OF REVENUE  
CORPORATIONS

14 SEP -2 AM 10:41

The date of each amendment(s) adoption: 07/18/2014, if other than the date this document was signed.

Effective date if applicable: 07/18/2014  
(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.

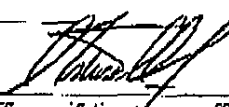
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"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.

x Dated 20 de agosto 2014.

x 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)

Arturo Marroquin

(Typed or printed name of person signing)

CEO

(Title of person signing)