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(Ac	ldress)			
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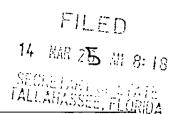
R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SERVICIOS BER: P1200001352		TORRES CA INC	
	of Amendment and fee are su			
Please return all corres	spondence concerning this mat	ter to the following:		
	SUSANA BIJANI			
		Name of Contact Person	1	
	JP GLOBAL BUSINESS SOLUTIONS INC			
		Firm/ Company		
	7325 NW 36TH S	ST		
		Address		
	MIAMI, FL 33166	-		
		City/ State and Zip Code	e	
DO	RAL@JPGBUSIN	IESS.COM		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	e call:		
SUSANA BIJANI at (305) 436-0093				
Name o	of Contact Person		de & 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)	
Mai	ling Address	<u>Street</u>	Address	
Amo	endment Section	Amendment Section		
	sion of Corporations	Division of Corporations		
P.O. Box 6327 Clifton Building				
Talls	ahassee, FL 32314		xecutive Center Circle assee, FL 32301	
		t allalla	I DEACH I I AND I	

Articles of Amendment to Articles of Incorporation of



SERVICIOS Y SUMINISTROS TORRES CA INC

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

P12000013520				
(Document N	umber of Corporation (if k	nown)	***	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this <i>Fl</i>	orida Profit Corporation ado	pts the following am	endment(s) to
A. If amending name, enter the new name	of the corporation:			
WORLD SUPPLIES EQUIP	PMENT CORP		The	new
name must be distinguishable and contain "Corp" "Inc.," or Co.," or the designation word "chartered," "professional association	n "Corp," "Inc," or "Co	". A professional corporati	ated" or the abbrevion name must conta	ziation iin the
B. Enter new principal office address, if a (Principal office address MUST BE A STRE			· · · · · · · · · · · · · · · · · · ·	
				
C. Enter new mailing address, if applicab				
(Mailing address <u>MAY BE A POST OF I</u>	·ICE_BOX)			
D. If amending the registered agent and/or		s in Florida, enter the name	of the	
new registered agent and/or the new re	gistered office address:			
Name of New Registered Agent				
	(Florida street	t address)		
No a Doctor of Office Address	(2 00) 1000 100 200	•		
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if chan		d d ad the c	e de la companya del companya de la companya del companya de la co	
I hereby accept the appointment as registered	ı ageni. 1 am jamıllar wil	n ana accept the obligations	oj ine position.	
Sional	ure of New Registered Ag	ent, 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: 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		_	
∧dd			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	l sheets, if necessary).	(Be specific)			
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*-					
		•			
	•				
		-1-7			
	t provides for an excl	hange, reclassificati	on, or cancellati	on of issued share	S.
If an amendmen		endment if not cont	ained in the ame	ndment itself:	-
provisions for in	mpiementing the ame				
provisions for in	cable, indicate N/A)				
provisions for in	mptementing the ame cable, indicate N/A)				
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provisions for in	cable, indicate N/A)				
provisions for in	cable, indicate N/A)				

The date of each amendment	t(s) adoption: 03/20/14	, if other than the
date this document was signed	i.	
Effective date if applicable:	03/20/14	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	" (voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_03/2	20/2014	
Signature	Long	
	By a director, president or other officer - if directors or officers have not been	_ ,
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	LUIS TORRES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	