## P1200061672

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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07/09/14--01010--019 \*\*35.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

Al'PROVED AND FILED

T. LEMIEUX



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Profit Corporation pursuant to section 607.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- If amending/adding officers/directors, list titles and addresses for each officer/director.
- If amending from a general corporation to a professional corporation, the purpose (specific nature of business) must be amended or added if not contained in the articles of incorporation.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

Pursuant to section 607.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

\$35.00 (Includes a letter of acknowledgment) Filing Fee

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

**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

For further information you may call the Amendment Section at (850) 245-6050

CR2E011 (07/13)

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: GIO - STAR PERU INC DOCUMENT NUMBER: P12000061672			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
UBERLINDA G. ACOSTA			
Name of Contact Person GIO-STAR PERU INC			
Firm/ Company			
28437 SW 135 AVE			
HOMESTEAD, FL 33033			
City/ State and Zip Code			
jc@giostarusa.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
UBERLINDA G. ACOSTA 786 256-9711			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
■ \$35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			

## Articles of Amendment to Articles of Incorporation of

GIO-STAR PERU	INC

Name of New Registered Agent

New Registered Office Address:

(Name of Corporation as currently filed with the	Florida Dept. of State)
P12000061672	
(Document Number of Corporation (	if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation  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)	FILEI  14 JUL -9 F  SECRETARY TALLAHASSEE
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	ES:

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

28442 SW 135 AVE

**HOMESTEAD** 

UBERLINDA G. ACOSTA

(Florida street address)

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	PT	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	PT		WILMER A. CASTRO	28442 SW 135 AVE
Add		<del></del>		HOMESTEAD, FL 33033
Remove				
2) Change	PT		UBERLINDA G. ACOSTA	28442 SW 135 AVE
Add		_		HOMESTEAD, FL 33033
Remove				
3) Change		_		
_ Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				

Ve are ammending article VII and the new president will be: UBERLINDA G. ACOS		
442 SW 135 AVE, Homestead, FI 33033	4 111	
100 2 v - 100		
4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
, (A)		
	Heater and the season	
If an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contain	ed in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment date this document was signed	t(s) adoption: July 1St , 2014	, if other than the
Effective date if applicable:	June 1st, 2014	
Enective date in applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
The amendment(s) was/we must be separately provide	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 vote	s cast for the amendment(s) was/were sufficient for approval	
by	35	
	(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.	ere adopted by the incorporators without shareholder action and shareholder	
Dated_Jul Signature	y 1st, 2014	
(l s	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)	_
	WILMER A CASTRO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>