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(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TRADE & EDUCUMENT NUMBER: P1200007723	BUSINESS PAR 6	TS CORP				
The enclosed Articles of Amendment and fee are su						
Please return all correspondence concerning this matter to the following:						
DESIREE TORR	DESIREE TORRES					
Name of Contact Person SICONT ENTERPRISES OF AMERICA INC						
Firm/ Company 13584 TURTLE MARSH LOOP N. 115						
Address ORLANDO FL 32837						
City/ State and Zip Code SICONT@LIVE.COM						
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:						
DESIREE TORRES	at (407	, 443-8973				
Name 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 \$\text{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		Address Iment Section				

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

TRADE & BUSINESS PARTS	SCORP				
(Name of Corporation as current	ly filed with the Florida	Dept. of State)			
P12000077236					
(Document Numbe	er of Corporation (if know	1)			
Pursuant to the provisions of section 607,1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida</i>	Profit Corporation ado	pts the following	amendmen	t(s) to
A. If amending name, enter the new name of th	ne corporation;				
				The new	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp." "Inc," or "Co"				
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A					
C. Enter new mailing address, if applicable:					
(Mailing address <u>MAY BE A POST OFFICE</u>					
D. If amending the registered agent and/or reginew registered agent and/or the new register	istered office address in l red office address:	Florida, enter the name	of the	13 BC	SECRE WVISION
Name of New Registered Agent				- IS	위크
	(Florida street addr	ess)		5 AM 10: 45	12.20 36.45 11.00
New Registered Office Address:		, Florida		Ď.	STA
	(City)		(Zip Code)	က်	34
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		l accept the obligations (of the position.		
Signature o	of New Registered Agent, i	fchanging			

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 <math>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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	DAMICO, ENYERBE	9731 BISCOTTI AVE
Add			ORLANDO FL 32829
Remove			
2) Change		<u> </u>	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ach additional sheets, if necessary)	(Be specific)			
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n amendment provides for an ex- ovisions for implementing the an	hange, reclassificat	ion, or cancellatio	on of issued shares	1
(if not applicable, indicate N/A)	endment if not cont	amen	idilent itsett.	
			· · · · · · · · · · · · · · · · · · ·	
		· · · · · ·		
<u> </u>				

The date of each amendment(s) ado date this document was signed.	ption: 09/30/2013	, if other than the
Effective date if applicable:		
Effective date if applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated 09/30/201		
selected.	ector, president of other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	_
J	ORGE POLEO	
-	(Typed or printed name of person signing)	
F	PRESIDENT	
_	(Title of person signing)	