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COVER LETTER

TO: Amendment Section Division of Corporations



NAME OF CORP	ORATION: AMERICAS PRO	DDUCTS FLORIDA DIST	RIBUTON CO
DOCUMENT NU	MBER:		
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
	GILBERTO GOMEZ		
		Name of Contact Person	n
	AMERICAS PRODUCTS I	FLORIDA DISTRIBUTIO	N CO
		Firm/ Company	
	1440 GEMINI BLVD. SUIT	E 4.	
		Address	
	ORLANDO, FLORIDA 328	337	
		City/ State and Zip Cod	c
CC	DMPRAS@APDWHOLESALE	E.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, pleas	se call:	·
GLORIA CHOQUETTE		407 at (8121218
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check	for the following amount made 1	payable to the Florida Depa	ertment of State;
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment 10 Articles of Incorporation

of

AMERICAS PRODUCTS FLORIDA DISTRIBUTION CO

PIVISION TARVED	
19 OCT 30 AM 95 16	
AM O	

(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
(Document Number	of Corporation (if.known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation: P12000088079			
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	1440 GEMINI BLVD.		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	SUITE 4		
	ORLANDO, FLORIDA 32837		
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 new registered agent and/or the new registered office address	dress in Florida, enter the name of the		
Name of New Registered Agent			
(Florida si	treet address)		
New Registered Office Address:	Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.		
Signature of New	Registered Agent, if changing		

If amending the Officers and/or Directors, eater 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	\underline{V}	Mike Jones		
\underline{X} Add	<u>SV</u>	Sally Smith		
<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1+ Change	D	Andres Felipe Gomez	735 Flower Fields Lane	
X Add			Orlando, Florida 32824	
Remove				
. 2) Change	D	Daniela Gomez	735 Flower Fields Lane	
<u> </u>			Orlando, Florida 32824	
Remove				
3.) Change				
Add		•		
Remove				
41 Change				
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) her (Be specific)		
			•
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			···
	 	•	
			
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f an amendment provides for an exch	ange, reclassification, or	r cancellation of issued sh	iares,
provisions for implementing the amer	idment if not contained	in the amendment itself:	
(if not applicable, indicate N/A)			

I he date of each amendment(s) ac fate this document was signed.	loption:, if other than the
10/2	4/2019
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory fifing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.
	roved by the shareholders through voting groups. The following statement 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 add action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder
10/24/2019 Dated	? Ibro Jan
selected	irector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diffunciary by that lidneiary)
	Gilberto Gomez
	(Typed or printed name of person signing)
	President
	(Title of person signing)