P13000065731

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TALLAHASSEE, FLORID

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GLOBAL S	SUPPLIES 07 IN	C
DOCUMENT NUMBER: P130000657	31	
The enclosed Articles of Amendment and fee are s		
Please return all correspondence concerning this m	natter to the following:	
Albert Corrada		
Albert Corrada 0	Name of Contact Persor	1
	Firm/ Company	
2655 LeJeune R	Rd, Suite 902	
	Address	
Coral Gables, Fl	*****	
	City/ State and Zip Code	
acorrada@corradac	pa.com	
	used for future annual report	notification)
For further information concerning this matter, plea	ase call:	
Albert Corrada	at (305	_, 804-8569
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$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		Address
Amendment Section Division of Corporations		ment Section
P.O. Box 6327		n of Corporations Building
Tallahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

GLOBAL SUPPLIES 07 INC

2013 SEP 19 AH 11: 53

(Name of Corporation as currently filed with the Florida Dept. of State) P13000065731 (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: 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) 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: 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	VP	Eduardo Falcon	2655 LeJeune Rd, Suite 902
Add			Suite 902
X Remove			Coral Gables, FL 33134
2) Change			
Add			
Remove			* 0. 10 200 2
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	~		
Add			
Remove			
6) Change			
Add			
Remove			

	ig or adding litional sheet	s. if neces:	al Article sary). (s, enter c Be specifi	hange(s) h c)	ere:			
duardo	Falcon	was i	mistal	kenly r	egiste	red as a	an office	er.	
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lf an amai	<u>ndment prov</u>	vidos fon a	n arabai	ago poolo	ecification	or cancella	tion of issue	d charec	
provision	is for impler	menting th	<u>ie amend</u>	lment if n	ot containe	d in the am	endment its	elf:	
(if no	ot applicable.	, indicate !	V/A)						
								<u></u>	
								1	

The date of each amendment(s) a	08/05/2013	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	n	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_08/0	5/13	
G'	V/G-	
Signature(By a	director, president or other officer – if directors or officers have not been	<u> </u>
selecte	ed. by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Luis Miguel Cabrera	
	(Typed or printed name of person signing)	
	President	

(Title of person signing)