P13000066203

(Requestor's Name)			
(Address)			
•			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Elisty Harris)			
(Document Number)			
Certified Copies Certificates of Status			
Constitution A. Ellin Office			
Special Instructions to Filing Officer:			

Office Use Only



900252752409

10/17/13--01003--018 **35.00

13 OCT 17 PM 1:0: SECRETARY OF STATE ALLAHASSEE, FLORIN

C. LEWIS

OCT 2.4 2013

EXAMINER

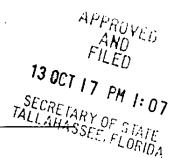
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:		OBAL PARTS	CORP		
DOCUMENT NUMBER:	1 100	700000200			
The enclosed Articles of Amenda	nent and fee are sub	omitted for filing.			
Please return all correspondence	concerning this mat	ter to the following:			
	JAVIER SMITH				
Name of Contact Person INTERGLOBAL PARTS CORP					
· · · · · · · · · · · · · · · · · · ·		Firm/ Company			
	7901 WEST 25th COURT				
· · · · · · · · · · · · · · · · · · ·		Address			
<u></u>	HIALE	AH , FL 33016			
		City/ State and Zip Code			
JSM	1ITH@INTE	RGLOBALPAR'	TS.COM		
E-ma	il address: (to be use	ed for future annual report	notification)		
For further information concerning	ng this matter, please	e call:			
JAVIER SMITH		at (954	275-0047		
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:					
	3.75 Filing Fee & tificate 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



INTERGLOBAL PARTS CORP

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

P13000066203

(Document Number of Corporation (if known)

lment(s) to

N/A	<u>ition:</u>	
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	c," or "Co". A professiona	
. Enter new principal office address, if applicable:	7901 W 25	th COURT
rincipal office address <u>MUST BE A STREET ADDRES</u> .	HIALEAH,	FL 33016
. Enter new mailing address, if applicable:	01//1 SUND	ISE LAKES BLVD
	3141 30IVIX	ion by with being
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	APT 112	
Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered of new registered agent and/or the new registered office.	APT 112	
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered of new registered agent and/or the new registered office Mame of New Registered Agent Name of New Registered Agent	APT 112 fice address in Florida, enteraddress:	
If amending the registered agent and/or registered of new registered agent and/or the new registered of Name of New Registered Agent 7901 V	APT 112 fice address in Florida, enteraddress: ER SMITH / 25th COURT Florida street address)	r the name of the
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered of new registered agent and/or the new registered office Mame of New Registered Agent 7901 V	APT 112 fice address in Florida, enteraddress: ER SMITH / 25th COURT 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	<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>	<u>Name</u>	<u>Addres</u> s	
1) Change	Р	MYRIAM GARZON	1050 NW 192 AVE	
Add			PEMBROKE PINES, FL	
Remove			33029	
2) Change	PTS	JAVIER SMITH	9141 SUNRISE LAKES	
Add			BLVD APT 112	
Remove			SUNRISE, FL 33322	
3) Change	<u></u>			
Add				
Remove				
4) Change				
Add				
Remove				
2)				
5) Change				
Remove				
6) Change		<u> </u>		
Add				
Remove				

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	•

•		ANOV
The date of each amendment(s) add	option:	if other than the
date this document was signed.		Sc. 47/2
Effective date if applicable:	OCTOBER 1st, 2013	AND THE MAN THAT THE MENT OF T
	(no more than 90 days after amen	adment file date) ASS OF OF
		TO PATE
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	PRIDA
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes ficient for approval.	
	oved by the shareholders through voting group each voting group entitled to vote separately or	
"The number of votes cast for	or the amendment(s) was/were sufficient for ap	proval
by		
· ·	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without sharehold	der action and shareholder
The amendment(s) was/were adoptaction was not required.	oted by the incorporators without shareholder a	ction and shareholder
Dated	15-2013	
Signature	faulte	
(By a din selected	rector, president or other officer – if directors of a preceif of a neceified fiduciary by that fiduciary)	
	JAVIER SMITH	
-	(Typed or printed name of pe	erson signing)
	PRESIDENT	
_	(Title of person signi	ing)