Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000239628 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			; -
		 ····	 ··············	

COR AMND/RESTATE/CORRECT OR O/D RESIGN BC PERFORMANCE PARTS U.S.A. INCORPORATED

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

НеИ

Fex: 8134365206

Articles of Amendment Articles of Incorporation of

(<u>Name</u> e	of Corporation as current	ly filed with the Florida Dept.	of State)		
P17000013960		-			
	(Document Number of	f Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation;	1006, Florida Statutes, this	Florida Profit Corporation ad	opts the following	g amendi	ment(s)
A. If amending name, enter the new n	ame of the corporation:				
					ew
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	lorp," "Inc." or "Co".	A professional corporation na			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3348 48 AVE NE		2021	
			:	الان	77
		Naples Florida 34120	***	15	d same
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7901 4th St N	<i>(j</i>)	AM 9:	
		STE 300	!	9:31	
		St. Petersburg FL 33702			_
D. If amending the registered agent an new registered agent and/or the new			ne of the		_
Name of New Registered Agent	Registered Agents Inc				
	7901 4th St N STE 300		· ·		
	(Florida sti	vet address)	• • , •		
New Registered Office Address:	St. Petersburg		Florida 33702		
		(City)	(Zip C	ode)	-

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.

Save

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s, 607,0120 (11) (e), F.S.

7/15/2024 10:39:07 PDT To: 18506176380 Page; 3/5 Fax: 8134365206

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)

Example:

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.

X Change	<u>PT</u> <u>Joh</u>	n Doe		
X Remove	<u>V</u> <u>Mil</u>	ce Jones		
X Add	<u>SV</u> <u>Sali</u>	y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1)Change	D. P. CEO	Tortola, Linda	124 Eveleigh Crescent, 224	
<u></u> ✓ Add			Windsor Ontario, Canada N9E 4至2	
Remove			: 5	
2) Change	Secretary	Tortola, Lucio	124 Eveleigh Crescent,	
∨ Add			Windsor Ontario, Canada N9E 4M2	
Remove 3) Change	CEO	TORTOLA, LINDA	124 EVELEIGH CRESCENT	
Add			WINDSOR ONTARIO, CA 48710	
Remove				
4) Change	DTS	TORTOLA, LINDA	124 EVELEIGH CRESCENT	
Add			WINDSOR ONTARIO, CA 48710	
Remove				
5) Change	DP	TORTOLA, LUCIO	45657 Port Street	
			PLYMOUTH, MI 48170	
Remove				
6)Change				
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
			
			•
		-,'	- Z <u>T</u>
		· · ·	<u> </u>
			-
		, .	വ
	-		3
		. ::	<u> </u>
			<u> သ</u>
7 * 6 * 6 * 6 * 6 * 6 * 6 * 6 * 6 * 6 * 			
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,		
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:		
(i) and apparental, material (may)			
			··

The date of each amendment(s) a date this document was signed.	doption:	, if oth	er than the
Effective date if applicable:	(no more than 90 days after amendment file date)		
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be li	isted as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action	and sharehold	der
☐ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.		
	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 cast	for the amendment(s) was/were sufficient for approval		
by	(voting group)	21	
	(voting group))24	
Dated_07/15/2024	4	2024 JUL 15	
Signature_	inda Portola		
selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	ر م	o. 3
	Linda Tortola		
	(Typed or printed name of person signing)		_
	President		
	(Title of person signing)		