## P19000080516

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	FERNANDO SCR/ RATION: P19000080516	AP METAL INC	
DOCUMENT NUM			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
•	FERNANDO ROJAS LOPEZ		
	FERNANDO SCRAP META	Name of Contact Person	1
	9708 REDWOOD BLVD	Firm/ Company	
	TAMPA,FL,33635	Address	
		City/ State and Zip Code	e
	info@mcbizsolutions.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
FERNANDO ROJAS	LOPEZ	561 at (	248-8988
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

RNANDO SCRAP METAL INC

9000080516 (Name of Corporation as cur	rently filed with the FI	lorida Dept. of State)		
(Document Numl	ber of Corporation (if k	nown)		
arsuant to the provisions of section 607.1006, Florida Statutes, Articles of Incorporation:	-	•	ng amendment(	s) to
. If amending name, enter the new name of the corporation	<u>n:</u>			
ame must be distinguishable and contain the word "corporation Inc.," or Co.," or the designation "Corp," "Inc," or "Co chartered," "professional association," or the abbreviation "I	". A professional cor,	orporated" or the abbreviat poration name must conto	The new ion "Corp.," ain the word	
. Enter new principal office address, if applicable:				
Principal office address <u>MUST BE A STREET ADDRESS</u> )	<del></del>		: 2	
	· · · · · · · · · · · · · · · · · · ·	<del></del>	921	
			. C	7
. Enter new mailing address, if applicable:		(1)	. 0	_
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	l
		· ' ‹ › ›	ë C	j
	<del>-, -, -,,</del>		70	
	· <del></del>		<del></del> <del>{</del>	2
If amending the registered agent and/or registered office new registered agent and/or the new registered office add	address in Florida, ent	ter the name of the		
Numa of New Basistanud towns			_	
(Florid	la street address)		<del></del>	
New Registered Office Address:		. Florida		
	(City)		Code)	
ew Registered Agent's Signature, if changing Registered Ag	ent:			
nereby accept the appointment as registered agent. I am famili	iar with and accept the	obligations of the position.		
Signature of Ne	w Registered Agent, if c	hanging	_	
		<b>5</b> 0		
teck if applicable The amendment(s) is/are being filed numbers to a 607 0120 ()	11) (.) F.C			
The amendment(s) is/are being filed pursuant to s. 607.0120 (1	11) (e), F.S.			

mending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and tress of each Officer and/or Director being added:

tach additional sheets, if necessary)

Example:

case note the officer/director title by the first letter of the office title:

= President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief cecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. resident, Treasurer, Director would be PTD.

hanges 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 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, like Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>SV</u>	Sally Sr	nith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
i) Change	VP	<del>-</del>		9708 REDWOOD BLVD TAMPA,FL,33635
Add				
Remove				
2) Change		<del>-</del>		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
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5) Change		<del></del>		
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6) Change		_		
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				Attended to the control of the	
f an amendment p	rovides for an exc	hange, reclassific	<u>cation, or cancella</u>	tion of issued sna	res.
f an amendment p	provides for an exception of the am	change, reclassificendment if not co	cation, or cancells ontained in the an	nendment itself:	res.
f an amendment p provisions for imp (if not applicat	provides for an exposer single stress of the second	change, reclassificendment if not co	cation, or cancells ontained in the an	nendment itself:	res,
If an amendment p provisions for imp (if not applicat	provides for an exc plementing the am ble, indicate N/A)	change, reclassifi endment if not c	cation, or cancella ontained in the an	nendment itself:	res,
If an amendment p provisions for imp (if not applicat	provides for an expolementing the amble, indicate N/A)	change, reclassifi iendment if not c	cation, or cancella	nendment itself:	res,
If an amendment p provisions for imp (if not applicat	provides for an exc plementing the am ble, indicate N/A)	change, reclassifi endment if not c	cation, or cancella	nendment itself:	res,
If an amendment p provisions for imp (if not applicat	provides for an excolementing the amble, indicate N/A)	change, reclassifi endment if not c	cation, or cancella	nendment itself:	res,
If an amendment p provisions for imp (if not applicat	provides for an exposer of the amble, indicate N/A)	change, reclassifi nendment if not c	cation, or cancella	nendment itself:	res,
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	provides for an expolementing the amble, indicate N/A)	change, reclassifinendment if not c	cation, or cancella	nendment itself:	res,

	th amendment(s) adoption:, if other than ent was signed.
ffootive date i	
ffective date <u>i</u>	(no more than 90 days after amendment file date)
	te inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as active date on the Department of State's records.
doption of An	nendment(s) (CHECK ONE)
The amendm action was no	tent(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder of required.
	ent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) holders was/were sufficient for approval.
must he sepa	ent(s) was/were approved by the shareholders through voting groups. The following statement arately provided for each voting group entitled to vote separately on the amendment(s):
"The n	
THE	umber of votes cast for the amendment(s) was/were sufficient for approval
by	umber of votes cast for the amendment(s) was/were sufficient for approval  " (voting group)
	(voting group)
	• • • • • • • • • • • • • • • • • • • •
	(voting group)  Dated
	(voting group)  Dated
	(voting group)  Dated  Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)