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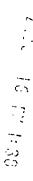


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R IVENTE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: UNLIMITED ELEC	CTRICAL PARTS CORP	
DOCUMENT NUMBI	ER: <u>P20000032199</u>		
	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
		EDWARD MEJIA	
_		Name of Contact Persor	-,,
	TAX	BUREAU SERVICE COF	LP .
_		Firm/ Company	
	1835	NW 112ND AV SUITE 16	4
-		Address	
		MIAMI FL 33172	
-		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
ı	EDEJIA@TBSTAX.NET		
-	•	sed for future annual report	notification)
	·	·	
For further information	concerning this matter, pleas	se call:	
EDWARD MEJIA		646 at (9964212 de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
S35 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 Division The C	Address Iment Section on of Corporations entre of Tallahassee
		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

UNLIMITED ELECTRICAL PARTS CORP

	MITED ELECTRICAL PARTS CONT
· <u></u> -	on as currently filed with the Florida Dept. of State)
P20000032199	
(Docum	nent Number of Corporation (if known)
tursuant to the provisions of section 607.1006, Floridals Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s
If amending name, enter the new name of the co	orporation:
	The new
	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word viation "P.A."
B. Enter new principal office address, if applicable	
Principal office address <u>MUST BE A STREET ADL</u>	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
). If amonding the registered agent and/or register	red office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
	2.4
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent.	ustered Agent: I am familiar with and accept the obligations of the position.
	CV D : 14 · CV
Signa	nature of New Registered Agent, if changing

Check if applicable

 $[\]Box$ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

____ Add

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 Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> <u>Address</u> (Check One) 1) X Change **LUIS URENA** 12135 NW 71 ST PARKLAND FL 33076 ___ Add ____ Remove 2) ____ Change ____ Add ____ Remove 3) ____ Change Add ____ Remove 4) ____ Change ____ Add __ Remove 5) ____ Change ____ Add ___ Remove 6) ____ Change

(Attach additional sheets,	if necessary). (es, enter change Be specific)	<u></u>			
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f an amendment provide provisions for implemen	es for an exchang	<u>te, reclassificati</u>	ion, or cancellati	on of issued shar	es,	
(if not applicable, ind	licate N/A)	nçar a not cont	ameu iii tue ame	nament itseit:		
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July 01, 2020 The date of each amendment(s) adoption:
late this document was signed.
Effective date <u>if applicable</u> ;
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)
Dated 7/1/20
Signature _ Luis UReND
(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)
(Typed or printed name of person signing)
- resident
(Title of person signing)

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