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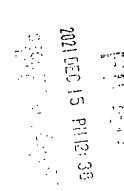
(Requestor's Name)				
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PICK-UP WAIT MAIL				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: JR Supplies and Equipment Corp.
DOCUMENT NUMBER: P 2 00000 66 18 3
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jose Ramon Galban Name of Contact Person
JR Supplies and Equipment Corp.
3105 NW 107 AVR Svite # 501
Doral, FL 37172 City/ State and Zip Code
Li-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tose lanon Gaban. at (786) 420-7567 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:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

FILED

	as currently filed with the Florida Dept. of State) 183 SECRETARY OF STATE TALL
(Documen	(83 TALL STATE OF Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St ts Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	The new
name must be distinguishable and contain the word "corp" (Inc.," or Co.," or the designation "Corp," "Inc." or chartered," "professional association," or the abbreviols. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	3105 NW 107 AVE Suite 501
C. Enter new mailing address, if applicable:	21 Alv. 102 And Swite 501
(Mailing address MAY BE A POST OFFICE BOX)	3105 NW 107 Ave Svite 501 Doral, FL 33172
D. If amending the registered agent and/or registerence registered agent and/or registered of	Doral, FL 33172 d office address in Florida, enter the name of the
D. If amending the registered agent and/or registere	Doral, FL 33172 d office address in Florida, enter the name of the
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	Doral, FL 33172 d office address in Florida, enter the name of the ffice address:
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	Doral, FL 33172 d office address in Florida, enter the name of the
D. If amending the registered agent and/or registere new registered agent and/or the new registered of Name of New Registered Agent New Registered Office Address:	Doral, FL 33172 d office address in Florida, enter the name of the ffice address: (Florida street address)

Check if applicable

☐ 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)

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	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

mending or a	Iding additional Articles, enter sheets, if necessary). (Be speci	change(s) here:			
ach additiona	update the	אייט של זיי אייט של זיי	ber it	Follow:	
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an amendm	nt provides for an exchange, rec	classification, or canc	ellation of issued s	nares,	
rovisions for	implementing the amendment i icable, indicate N/A)	f not contained in the	<u>e amendment itself</u>		
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	St. Joseph
Effective date <u>if applicable</u> : (no more than 90 days after amenda	nent file date)
Note: If the date inserted in this block does not meet the applicable statutory filin document's effective date on the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors vaction was not required.	rithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes of by the shareholders was/were sufficient for approval.	ast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups must be separately provided for each voting group entitled to vote separately on	s. The following statement the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for ap	proval
by(voting group)	
Dated	
Signature Tol laum Colpan	
D. Vien the president or other officer if directors of	officers have not been
selected, by an incorporator – if in the hands of a receiv	er, trustee, or other court
appointed fiduciary by that fiduciary)	
JOSE Ramon Galban. (Typed or printed name of person si	
(Typed or printed name of person si	gning)
Prositlet (Title of person signing)	
(Title of person signing)	