P97000051505

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2010 HAY -3 A 10: 36
SECRETARY OF STATE

Ameral Thews 5-7-10

COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: AMERICAN Tool Supply Corp.			
DOCUMENT NUMBER: ROF# P970000 51505			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Kana Dian Tollers			
Amencan Tool Supply Company			
10423 SW 16 Manor Address			
Davie (33324 City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call: at (954) 8498660 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:			
Certificate of Status Certificate	5 Filing Fee & S52.50 Filing Fee fied Copy tional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Address Iment Section		
Division of Corporations Division	on of Corporations		
	Building xecutive Center Circle		

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2010

JAMES JEFFERS AMERICAN TOOL SUPPLY CORP. 10423 SW 16TH MANOR DAVIE, FL 33324

SUBJECT: AMERICAN TOOL SUPPLY CORP.

Ref. Number: P97000051505

We have received your document for AMERICAN TOOL SUPPLY CORP. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 110A00007562

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Articles of Amendment

to

Articles of Incorporation

FILED

(Name of Corporation as currently filed with the Florida Dept. of State)	2010 HAY -3 A 10: 36
Ket. # P97000051505	
(Document Number of Corporation (if known)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corpo</i> amendment(s) to its Articles of Incorporation:	oration adopts the following
A. If amending name, enter the new name of the corporation:	
$\mathcal{N}\mathcal{A}$	The new
name must be distinguishable and contain the word "corporation," "company," or "abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A proname must contain the word "chartered," "professional association," or the abbreviation "Inc.," or the designation ("Inc.," or "Co", "Inc.," or "Inc.," or "Co", "Inc.," or "Co", "Inc.," or "Co", "Inc.," or "Co", "Inc.," or "Inc.," or "Co", "Inc.," or	ofessional corporation
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the	e name of the
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: (Florida street address)	√ osido 3332M
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I amygmiliar with and accept the obligious controls.	•
Signature of New Registered Agent, if changing	

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) <u>Address</u> Title Title **Type of Action** E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

. If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment(s) adoption: 3/19/10	
Effective date if applicable: 3/19/10 (date of addption is i	required)
(no mbre than 90 days after amendmen	t file date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The nun by the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote s	
"The number of votes cast for the amendment(s) was/were suff	icient for approval
by(voting group)	,,,
The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
Dated_3/19/10	
Signature	
(By a directof, president or other officer – if selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	
Laxice Dan	Cons
(Typed or printed name of	person signing)
(Title of perch signing)	