

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LINEAR DISTRIBUTORS, INC.							
DOCUMENT NUMBER: P99000021311							
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.					
Please return all corre	espondence concerning this ma	tter to the following:					
	Fernando Javier Suarez						
		Name of Contact Person	1				
		Firm/ Company					
	5201 N.W. 77th Ave. Suite 2	00					
		Address					
	Miami, Florida 33166						
		City/ State and Zip Cod	e				
ani@	Deternalighting.com						
	E-mail address: (to be us	sed for future annual report	notification)				
For further information	on concerning this matter, pleas	se call:					
F. Javier Suarez		at ()				
Name of Contact Person		Area Co	de & Daytime Telephone Number				
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:				
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

71157

LINEAR DISTRIBUTORS, INC.

2011 DEC 22 FM 3: 36

(Name of Corporation as currently filed with the Florida Dept. of	f State)
P99000021311	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adoptits Articles of Incorporation:	ts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporat "Corp.," "Inc.," or Co.," or the designation "Corp,," "Inc," or "Co". A professional corporation word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Fine par office address most bent strate most most most most most most most most	
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 name of new registered agent and/or the new registered office address:	of the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: , FI	lorida
(City)	(Zip Code)
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	f the position.
Signature of New Registered Agent, if changing	

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DPVS	MARCOS J. QUINTERO	5201 N.W. 77TH AVE. SUITE 200
Add			MIAMI, FL 33166
X Remove			
2) Change	DPVS	FERNANDO JAVIER SUAREZ	5201 N.W. 77TH. SUITE 200
X Add			MIAMI, FL 33166
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		-	
Remove			.
INCHIBIYE			

	ticles, enter change(s) here: (Be specific)
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	shange realessification or cancellation of issued shares
lan amandmant provides for an aval	
an amendment provides for an exclusion for an exclusions for implementing the ame	endment if not contained in the amendment itself:
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
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f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90	days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Depar		able statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopt by the shareholders was/were suff		number of votes cast for the amendment(s)
		ugh voting groups. The following statement ote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were	sufficient for approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors v	vithout shareholder action and shareholder
☐ The amendment(s) was/were adopt action was not required.	ted by the incorporators witho	out shareholder action and shareholder
Dated12/2	20/2017 Yeurten	
Signature SIL	Your ten	
(By a dife	ector, president or other office	er – if directors or officers have not been
selected,	by an incorporator – if in the	hands of a receiver, trustee, or other court
appointed	d fiduciary by that fiduciary)	
	MARKES PUIN	irex c
_	(Typed or printed na	ame of person signing)
_	PRESIDENT	f person signing)
	(Title of	f person signing)