580684

| (Re | equestor's Name) | - |
|-------------------------|--------------------|-----------|
| (Ac | ldress) | |
| (Ac | idress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | , |
| | | |
| | | |
| | | |
| | | |

Office Use Only



900241512369

11/15/12--01017--014 **35.00



Phys 1/1617

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Global Industrial Parts Corp.

Name of Corporation

DOCUMENT NUMBER

S80684

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Mario E. Mansito

Name of Contact Person

G & M Accounting Services Inc

Firm/Company

175 Fountainebleau Blvd Ste 1-R9

Address

Miami, FL 33172

City/State and Zip Code

eduardo@g-m-accounting.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mario E. Mansito

, 305

485-1042

Name of Contact Person

Area Code & Daytime Telephone Number

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of ch | hange is submitted for a corporation organized under the laws of the State of Florida Florida | |
|--|---|----------|
| | der to change its registered office or registered agent, or both, in the State of Florida. | |
| | of the corporation: Global Industrial Parts Corp. | |
| Miami, F | al office address: 15953 SW 139th St FL 33196 | ~ |
| 3. The mailing | address (if different): | . |
| | prporation/qualification: 09/17/1991 Document number: \$80684 | |
| The name an Florida Depart | nd street address of the current registered agent and registered office on file with the samment of State: (If resigned, enter resigned) | |
| | Susana Mekler (resigned) | |
| | 15953 SW 139th St ≥ | |
| | Miami, FL 33196 | |
| 6. The name an (if changed): | Gonzalo Toyar | F |
| | 15953 SW 139th St | IT |
| | P.O. Box NOT acceptable | |
| | Miami, FL 33196 | |
| The street addr | tress of its registered office and the street address of the business office of its registered agent, if he identical. | |
| | was anthorized by resolution duly adopted by its board of directors or by an officer so the corporation has been notified in writing of the change. | |
| × | Nixue Mickle Susana Mekler, PD | |
| , | of the appointment as registered agent and agree to act in this capacity, eto comply with the provisions of all statutes relative to the proper and complete of my duffes, and I am familiar with and accept the obligation of my position as registered in document is being filed merely to reflect a change in the registered office address. I writing of this change is the corporation has been notified in writing of this change. | ~ |
| × | Execute of Verticans Agent | |
| If signing on b | schalf of an entity: | |
| | no Texas | |
| 1 | Typed or Printed Name | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVINION OF CORPORATIONS, P.O. BOX 6327, TALEAHASSEE, FL 32314 CR2E045 (03/12)