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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

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TAME OF CORPORATION: BOSS Lady Auto
OCUMENT NUMBER:
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
Mame of Contact Person
Firm/ Company
801 SR-436 W Stc 2209
Altamonte Springs Fr 32714 City State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Name of Contact Person at (407 ) 796 1996  Area Code & Daytime Telephone Number
nclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee  Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy  (Additional copy is enclosed)  Certified Copy  (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

## FILED

	of	2021 DEC 16	AM O. II.
Bass Lady 1	Au to	ZUZI DEG 10	ип 0- 14
(Name of Gorborati	on as currently filed with the Flo	rida Dept. of State DETARY	GF STATE
P1400003	47482	MECHINOSE	7100 (
(Docun	nent Number of Corporation (if known	own)	
Pursuant to the provisions of section 607.1006, Floridats Articles of Incorporation:	a Statutes, this <i>Florida Profit Corp</i>	oration adopts the following:	amendment(s
A. If amending name, enter the new name of the co	rparation.		
name must he distinguishable and contain the word "co". "Inc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbre	orporation," "conlpany," or "incor " or "Co". A professional corp.	porated" or the abbreviation oration name must contain	The new "Corp.," the word
B. Enter new principal office address, if applicable	<u></u>		
Principal office address <u>MUST BE A STREET ADD</u>	ORESS )		
	<del></del>		<del></del>
	<del>-</del>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	X)		_
	<del></del>		
			<del></del>
. If amending the registered agent and/or register new registered agent and/or the new registered (	ed office address in Florida, ente	r the name of the	
new registered agent and/or the new registered (	ed office address in Florida, ente	r the name of the	
. If amending the registered agent and/or register new registered agent and/or the new registered of New Registered Agent	ed office address in Florida, ente	r the name of the	<del></del>
new registered agent and/or the new registered (	ed office address in Florida, ente office address:	r the name of the	
Name of New Registered Agent	ed office address in Florida, ente		
new registered agent and/or the new registered (	ed office address in Florida, ente office address: (Florida street address)	Florida	le)
Name of New Registered Agent	ed office address in Florida, ente office address:		le)
Name of New Registered Agent	ed office address in Florida, ente office address: (Florida street address)	Florida	de)
Name of New Registered Agent  New Registered Office Address:  ew Registered Agent's Signature, if changing Registered Agent's Signature.	cd office address in Florida, enteroffice address:  (Florida street address)  (City)	Florida(Zip Cod	(e)
Name of New Registered Agent	cd office address in Florida, enteroffice address:  (Florida street address)  (City)	Florida(Zip Cod	!e)
Name of New Registered Agent  New Registered Office Address:  We Registered Agent's Signature, if changing Registered Agent's Signature.	cd office address in Florida, enteroffice address:  (Florida street address)  (City)	Florida(Zip Cod	(e)
Name of New Registered Agent  New Registered Office Address:  We Registered Agent's Signature, if changing Registered Agent's Signature.	cd office address in Florida, enteroffice address:  (Florida street address)  (City)	Florida(Zip Cod	le)

Check if applicable

 $<sup>\</sup>Box$  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)

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.

X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP_	Reggie Smith	801 SK-436
Add		<i>3</i>	Ste 2209
Remove			Altamonte Springs, Fc 3211
2) Change	VP_	Reginald Smith	801 SK- 436
X_ Add		O	Stc 2209
Remove 3) Change			Alternante Springs EL 32714
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove-			

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
<del>-</del>	
	•
<u>If an amendment provides for an exch</u>	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	idment if not contained in the amendment itself:
(if not applicable indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

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The date of each amendment(s) adoption:	ner than the
Effective date if applicable: $2 - 2 - 2$ (no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharehol action was not required.	der
☐ 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)	
Signature  (By addirector, 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)	
Reginald Smith Typed or printed name of person signing)	_
President	
(Title of person signing)	_