P17000032035

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COVER LETTER

Division of Corporations NAME OF CORPORATION: Paydev Auto DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person

Raider Auto Sales Corp

Firm/ Company

1423 SE 16th PL Ste 204

Address Cape (o, a) FL 33972
City/ State and Zip Code OSCAY Whole Sale Oyahoo. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: OSCAY A. LAZO at (Z39) 878-1991

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: ☐\$43.75 Filing Fee & Certificate of Status Certified Copy □\$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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 to Articles of Incorporation

of

Barder 12 U20	Sales	(01P	•
(Name o	f Corporation as currentl	v filed with the Florida Der	ot. of State)
<u>P1700003</u>	32035		2001 111 -0 511 31 00
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation :	idopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co". >	A professional corporation	" or the abbreviation "Corp.,"
B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u>	f applicable; TREET_ADDRESS)		
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C) D. If amending the registered agent annew registered agent and/or the new	<u>OFFICE BOX</u>) d/or registered office add:		ame of the
Name of New Registered Agent		L. Verzaga	Lobo
	_	reet address)	
New Registered Office Address:	515 Grant	Aue lehigh Acres	5_, Florida <u>3397)2</u> (Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe			ns of the position.
	1 low	1 less	
	Signature of New R	egistered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

	mal sheets, if necesso		, .			
chach	ed are	the me	eting	MINUJE	<u>.</u>	
that	Pemoul	<u>Jhon</u>	ny F	erez,	and	
In his	place	enters	Cla	udia	end Veizaga	Lo
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					<u> </u>	
				<u></u> .		
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provisions fo	or implementing the	n exchange, reclassif e amendment if not				
(if not ap	oplicable, indicate N			-		
				,		
-						
						_

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)

Example:

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>	John Doe	
X Remove	$\underline{\mathbf{V}}$	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	0	Shonny Perez	401 Atwarter St
Add Remove		•	Portcholiotle Fb 33954
2) Change	D	Claudin L. Veizaga	515 Grant Ave Lehich
Add Remove Change			Acres FL 33972
Add			
Remove 4) Change			
Add			
5) Change		_	
Add			
6) Change			
Add			
Remove			

The date of each amendment(s) ad	option:	, if other than th
date this document was signed. Effective date if applicable:	4/23/2024	
Enective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopaction was not required.	pted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):	ı
	for the amendment(s) was/were sufficient for approval	
by Monny Derez	(voting group)	b o-
Dated 4/2	3/202-1	
Sumatura		
(By a di	rector, prysident or other officer - if directors or officers have not been	
selected	i, by an inserporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	
	OSCUR A. LaZo (Typed or printed name of person signing)	
•	(Typed or printed name of person signing)	
	Prosident	
•	(Title of person signing)	