## P18000012643

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2018 AUG -8 AM 11: 35 SECRETARY OF STATE

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: H & J AUTO REI	PAIR CORP		
DOCUMENT NUM	BER:			
	of Amendment and fee are su	abmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	WINDY NEGRON MONET	,		
		Name of Contact Perso	n	
	H & J AUTO REPAIR COR	P		
		Firm/ Company		
	3956 TOWN CENTER BLV	'D STE 294		
		Address		
	ORLANDO, FL 32837			
		City/ State and Zip Cod	e	
WIN	IDYMONET@YAHOO.COM	1		
· ·		sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:	203-9678	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 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, FI. 32314		Amenc Divisio Clifton	Address  Iment Section on of Corporations Building Executive Center Circle	
1111		Tallabasson, El 32301		

## Articles of Amendment to Articles of Incorporation of

## FILED

H & J AUTO REPAIR CORP 2018 AUG -8 AM 11: 35 (Name of Corporation as currently filed with the Florida Dept. of State) P18000012643 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: H & J AUTO SERVICES CORP name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the 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 ) 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 the new registered agent and/or the new registered office address; Name of New Registered Agent \_ (Florida street address) New Registered Office Address: (Cire) 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 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 <math>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.

Mike Jones, v. as Kemov Example:	e, and Sau	y Smith, Sv. as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			<del></del>
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

(Attach addi.	e or adding additional sheets, if	necessary).	es, enter chang (Be specific)	<u>(e(s) nere</u> .			
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If an ameno	<u>iment provides</u> for implement	s for an exchai ing the amend	<u>ige, reclassific</u> Iment if not co	<u>ation, or cance</u> ntained in the	llation of issued amendment itse	<u>  shares,</u> If:	
(if not	applicable, indi	icate N/A)				<del></del>	
						•	
							<del> </del>

	08-01-2018	
	adoption:	, if other than the
date this document was signed.	D (AL 2/A19)	
Effective date <u>if applicable</u> :	8-01-2018	
	(no more than 90) days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date v Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
, <u> </u>	(voting group)	
The amendment(s) was/were a action was not required.	idopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	idopted by the incorporators without shareholder action and shareholder	
Dated 💢	11/18	
60		
(By a select	a director, president or other officer – if directors or officers have not been cled, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	WINDY NEGRON MONET	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	