## P97000010736

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		ļ

Office Use Only



900266213929

11/12/14--01017--019 \*\*43.75

JIVISION OF CORPORATIONS

14 MOV 12 AH 8: 49

C. Lewis -14

## COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: S & K Muffler, Inc DOCUMENT NUMBER: P97000010736 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Scott Keeler Name of Contact Person S & K Muffler, Inc Firm/Company PO Box 61144 Address Jacksonville, Florida 32236-1144 City/ State and Zip Code sam@eavates.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Scott Keeler Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address **Amendment Section** Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



S & K Muffler, Inc

14 NOV 12 AM 8: 49

P97000010736	currently filed with the Flo	rida Dept. of State)		
(Document	Number of Corporation (if k	nown)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Fl	orida Profit Corporation add	opts the following	amendment(s) to
A. If amending name, enter the new name	me of the corporation:			
N/A				The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associate	ation "Corp," "Inc," or "Co	". A professional corporat	ated" or the ab	breviation
		л. N/A		·
B. Enter new principal office address, in (Principal office address MUST BE A ST			<del> </del>	
(1-1000pm 0,9000 mm 050 <u>1120 1 mm 1 m</u>				
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A		
D. If amounting the resistant description	Non-monitorinal acciona addissor			
<ul> <li>If amending the registered agent and new registered agent and/or the new</li> </ul>		s in riorida, enter the name	e or the	
Name of New Registered Agent	N/A			
	(Florida street	address)		
New Registered Office Address;		, Florida		
	(City)	, 1 10/144	(Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		h and accept the obligations	of the position.	
Sign	nature of New Registered Ago	ent, 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.

<u>X</u> 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>	Address
1) Change	. <u>V</u>	Timothy P Yates Jr	1439 Jones Road
Add			Jacksonville, FL 32220
Remove			
2) Change	s	Ryan Jerome	17255 Normandy Blvd
✓ Add			Jacksonville, FL 32234
Remove			
3) Change		<u> </u>	-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	·
Add			
Remove			
6) Change			<del></del>
Add		·• · · · · · · · · · · · · · · · · · ·	
Remove			· · · · · · · · · · · · · · · · · · ·
[ [ Kelliove			

I/A	scessury). (De	specific)			
A					
				<u> </u>	
		<del></del>			
					-
			··· · · · · · · · · · · · · · · · · ·		
		<u>.</u>			
· · · · · · · · · · · · · · · · · · ·				, , , , , , , , , , , , , , , , , , , ,	
			<del> </del>		
		_			
· · · · · · · · · · · · · · · · · · ·					
			····		
provisions for implementin (if not applicable, indica	ig the amendme	., reclassificatent if not con	ion, or cancella ained in the an	ition of issued si nendment itself:	hares,
provisions for implementin (if not applicable, indica	ig the amendme	., reclassificatent if not con	ion, or cancella ained in the an	ition of issued si nendment itself:	hares,
provisions for implementin (if not applicable, indica	ig the amendme	ent if not con	ion, or cancella ained in the an	tion of issued s nendment itself:	hares,
provisions for implementin (if not applicable, indica	ig the amendme	e, reclassification if not con	ion, or cancella ained in the an	ition of issued s nendment itself:	hares.
provisions for implementin (if not applicable, indica	ig the amendme	ent if not con	ion, or cancella ained in the an	ition of issued si nendment itself:	hares.
provisions for implementin (if not applicable, indica	ig the amendme	e, reclassification if not con	ion, or cancella ained in the an	ition of issued s nendment itself:	hares,
provisions for implementin (if not applicable, indica	ig the amendme	ent if not con	ion, or cancella ained in the an	ition of issued si iendment itself:	hares.
If an amendment provides for implementin (if not applicable, indicable)	ig the amendme	e, reclassification if not con	ion, or cancella ained in the an	ition of issued sinendment itself:	hares.
provisions for implementin (if not applicable, indica	ig the amendme	ent if not con	ion, or cancella	ition of issued sinendment itself:	hares.

The date of each amendment(s) adoption: N/A	SECRETARY OF STATE SECRETARY OF STATE STORE OF CORPORATIONS	, if other than the
date this document was signed.  Effective date if applicable:	14 MOV 12 AM 8: 49	
	han 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	. The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle		
"The number of votes cast for the amendment(s) was	s/were sufficient for approval	
by		
(voting group)		
The amendment(s) was/were adopted by the board of dire action was not required.	ectors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators action was not required.	s without shareholder action and shareholder	
Dated 11-10-14	<del></del>	
Signature		
(By a director, president or other	r officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ciary)	<del></del>
Scott Keeler		
(Турес	d or printed name of person signing)	
President		
<del></del>	(Title of person signing)	<del></del>