P05000001321

(Re	equestor's Name)	
(Ac	ddress)	-
(Address)		
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AAA Roadway Complete Auto Repair Center luc.
DOCUMENT NUMBER: PO 500001321
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Teremy Morgado (Name of Cónthict Person)
AAA Roadway Complete auto Repair Center Lix
23193A SANDALFOUT PLAZA Drive
BOCA 12 ATON, FL 33428 (City/ State/ and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (54) 451-0900 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Gaines Street Tallahassee, FL 32399

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Articles of Amendment
to
Articles of Incorporation of
AAA Roadway Complete auto Repair Center INC. (Name of corporation as currently filed with the Florida Dept. of State)
Po 50000 132-1 (Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ACTICITY VII - Addition of AFFICE
Transien of Officer
<u> </u>
Vice President: Susan Botwinick
19740 Saugrass DR. #802
BOCA RATON, FL 33434
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 3-1-05
Effective date if applicable: 3-1-05 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved 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)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signed this day of,
appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
PRESIDENT (Title of person signing)

FILING FEE: \$35