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RECRETARY OF STATE

HMC9 JAN 02 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LANCAST DOCUMENT NUMBER: P130000975		O TIRE CO INC		
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this may	tter to the following:			
WINSTON WE	ILHEIMER	·		
IN HOME TAX				
206 S SPRING	Firm/ Company GARDEN A	Ë		
DELAND FL 32	Address 2720			
City/ State and Zip Code INHOMETAXSERVICE@MSN.COM E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
WINSTON WEILHEIMER	at (3867368752		
Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:		
■ \$35 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, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301		

Articles of Amendment

to

Articles of Incorporation

TILED

P13000097521

(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:

			The
me must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "(ord "chartered," "professional association," o	Corp," "Inc," or "Co". A professi	or "incorporated" i ional corporation nat	or the abbreviat ne must contain
Enter new principal office address, if applie	cable:		
rincipal office address <u>MUST BE A STREET</u>	ADDRESS)		
	·	<u> </u>	
Enter new mailing address, if applicable:	T. BOLD		
(Mailing address MAY BE A POST OFFICE	<u> </u>		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

If amonding the registered agent and/on use			
If amending the registered agent and/or reg new registered agent and/or the new registered		enter the name of the	
new registered agent and/or the new register	ered office address:	enter the name of the	
		enter the name of the	······································
new registered agent and/or the new register	ered office address:	enter the name of the	
Name of New Registered Agent	ered office address:		
new registered agent and/or the new register	ered office address:	, Florida	
Name of New Registered Agent	ered office address; (Florida street address)	, Florida	
Name of New Registered Agent New Registered Office Address:	(Florida street address)	, Florida	
Name of New Registered Agent	(Florida street address) (City) Registered Agent:	, Florida(Zip	Code)

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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l) Change	S	SARLA SACHDEVA	5015 TREASURE CAY RD
Add Remove			TAVARES FL 32778
2) Change	S	KAMAL N SACHDEVA	498 W ROSEWOOD LANE
X Add			TAVARES FL 32778
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	•••		
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	•
	•
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
orovisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) act this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
action was not required.	pted by the incorporators without shareholder action and shareholder	
_{Dated} 12/1	7/2013	
Signature	7/2013 	
(By a di selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	_
	YOGINDER WADHWA	···
	(Typed or printed name of porcon cigning)	

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)