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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOI	RATION: ECHEVARRIA'S	TOWING CORP	
DOCUMENT NUMB	P17000061445		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DUNIESKY ECHEVARRIA	A FERNANDEZ	
		Name of Contact Perso	n
		Firm/ Company	
	14511 SW 289 TERRACE		
	HOMESTEAD, FL 33033	Address	
		City/ State and Zip Cod	
	a concerning this matter, pleas		296.6126
DUNIESKY ECHEVARRIA FERNANDEZ Name of Contact Person		at (ode & Daytime Telephone Number
	r the following amount made		, ,
S35 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, FL 32314		Amenc Divisio Cliftor 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation

ECHEVARRIA'S TOWING CORP

(Name of Corporation as currently filed with the Florida Dent. of State)

te	·//,
Articles of In	corporation
CHEVARRIA'S TOWING CORP	10%
(Name of Corporation as current	tly filed with the Florida Dept. of State)
7000061445	
(Document Number of	of Corporation (if known)
suant to the provisions of section 607,1006. Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
If amending name, enter the new name of the corporation:	
'A	The new
me must be distinguishable and contain the word "corporation "orp.," "Inc.," or Co.," or the designation "Corp." "Inc." or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	14511 SW 289 TERRACE
incipal office address <u>MUST BE A STREET ADDRESS</u>)	HOMESTEAD, FL 33033
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	14511 SW 289 TERRACE
	HOMESTEAD, FL 33033
ar i i i i i i i i i i i i i i i i i i i	
If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	
мате ој меж кедіметеа ядет	
t Florida st	reet address)
(Florida st New Registered Office Address:	reet address) , Florida

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 PTD.

Changes should be noted in the following manner. Currently John Doc 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 Doe		
X Remove	$\underline{\mathcal{Y}}$	Mike Jones		
<u>X</u> Add	<u>8V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	PT	DUNIESKY ECHEVARRIA F	360 SW 3 STREET	
Add XRemove			FLORIDA CITY FL 33034	
2)Change	PT	GUSTAVO C. SARRIA	14511 SW 289 TERRACE	
X Add			HOMESTEAD, FL 33033	
Remove 3.1 Change	SV	DUNIESKY ECHEVARRIA F	14511 SW 289 TERRACE	
X Add			HOMESTEAD, FL 33033	
Remove				
4) Change				
Add Remove				
5) Change				
Add Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N A)	nument who contained in the amenument user:
N/A	
	

	11/15/2017
The date of each amendment(s) date this document was signed.	adoption:, if other than the
•	1/15/20}7
Effective date if applicable:	77,9207
	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east 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):
	ist for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required,	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
•	Λ
11/15/20	17//
Dated	/
· **	
Signature	director, president or other officer – if directors or officers have not been
/ sclee	rector, president or other officer – if directors or officers have not been steel, by an incorporator – if in the hands of a receiver, trustee, or other court binted (iduciary by that fiduciary)
	DUNIESKY ECHEVARRIA FERNANDEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)