## 288135

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MILTON AUTO P	ARTS CO INC	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	J SCOTT СООК		
•		Name of Contact Person	
		Firm/ Company	
	PO BOX 755		
		Address	
	MILTON, FL 32570		····
		City/ State and Zip Code	<b>)</b>
	HOMEWITHJANICE@AOI	COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
JANICE COOK		at (850	698-2209
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	the following amount made	payable to the Florida Depa	urtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address indment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

MILTON AUTO PARTS CO INC

WILLION AUTO PARTS COINC	4 CI 1 4 A FI	J. DA. of Canan
1	n as currently filed with the Flori	da Dept. of State)
288135		
(Docum	ent Number of Corporation (if knov	m)
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this Florida Profit Corpor	ration adopts the following amendment(s)
A. If amending name, enter the new name of the co	rporation:	
		The new
ame must be distinguishable and contain the word "co 'Inc.," or Co.," or the designation "Corp," "Inc." 'chartered," "professional association," or the abbrev	or "Co". A professional corpor	
3. Enter new principal office address, if applicable:		7202 174 174
Principal office address <u>MUST BE A STREET ADD</u>		F8 8 71
		6
		SEC.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	vı	ق ق
(Mulling undress MAT BE A FOST OFFICE BO)		
		6
). If amending the registered agent and/or register		the name of the
new registered agent and/or the new registered (	office address:	
Name of New Registered Agent		
	(Florida street address)	
	(* 10.11 50. 50. 11 50.)	
New Registered Office Address:	(City)	, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	irtared Agents	
hereby accept the appointment as registered agent.		oligations of the position.
	•	
Signa	ture of New Registered Agent, if ch	anging
~		
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X 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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	VP	MICHAEL C COOK	4620 GERI ST
Add			MILTON, FL 32570
Remove	S	JANICE M COOK	4726 GERI ST
2) Change X Add			MILTON, FL 32570
Remove Change	VP	LEONARD H BATES	6528 LAKESHORE DR.
Add			MILTON, FL 32570
X Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

<ul> <li>If amending or adding additional Arti (Attach additional sheets, if necessary).</li> </ul>	(Be specific)
	<del></del>
<del>-</del> .	
. If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
···	
· · · · · ·	

The date of each amendment(s)	OCTOBER 1, 2021	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	TOBER 1, 2021	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date repartment of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder action	and shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
ОСТОВЕ	R 1, 2021	
Dated		
Signature	director, president or other officer – if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
	nted fiduciary by that fiduciary)	
	J SCOTT COOK	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del>.</del>