

F52664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

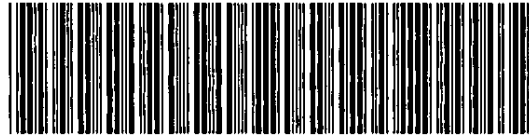
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/19/13--01017--005 **35.00

FILED

13 AUG 19 AM 10:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
AUG 22 2013
EXAMINER



FLORIDA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES
COMMISSIONER ADAM H. PUTNAM

August 9, 2013

Refer To: DTN2481385 MV3082

CUMMINGS BROTHERS TRUCK REPAIR, INC.
2611 HAMMONDVILLE RD
POMPANO BEACH, FL 33069-1513

Re: First Notice of Deficiency DTN: 2481385

Dear Applicant/Filer:

The Department received your application/filing submitted under Chapter 559, Part IX, Florida Statutes. The application/filing is deficient for the following reasons:

1. The application submitted lists the business as a Corporation. The Department of State does not show an active Corporation for this name. Please submit documentation showing the Corporation is active, or the business type has changed. If you have a question regarding your Corporation, you may contact the Department of State, Division of Corporations at (850) 245-6059 or 800-755-5111.

Pursuant to section 120.60, Florida Statutes, this Notice is provided within 30 days of receiving your application/filing to enable you to correct the cited deficiencies for further review by the Department. Response to this letter should resolve each deficiency cited above; do not submit a partial response.

If these deficiencies are not corrected within 30 days from your receipt of this Notice, the application/filing will be denied and the Department will pursue its available legal remedies. Operating as a Motor Vehicle Repair without being properly registered/licensed is a violation of Chapter 559, Part IX, Florida Statutes.

Thank you for your attention to this matter. If you have any questions regarding your application/filing, please contact the undersigned at the number listed below.

Sincerely,

Janice Blair
Janice Blair
Regulatory Consultant
850-410-3780
Fax: 850-410-3804
janice.blair@freshfromflorida.com

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CUMMINGS BROS. TRUCK REPAIR, INC.
DOCUMENT NUMBER: F52664

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROY S. CUMMINGS

Name of Contact Person

CUMMINGS BROTHERS TRUCK REPAIR, INC.

Firm/ Company

2611 HAMMONDVILLE ROAD

Address

POMPANO BEACH, FL 33069

City/ State and Zip Code

roy@cummingsleasing.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROY CUMMINGS

Name of Contact Person

at (954) 444-7944

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

CUMMINGS BROS. TRUCK REPAIR, INC.

13 AUG 19 AM 10:04

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

F52664

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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:

A. If amending name, enter the new name of the corporation:

CUMMINGS BROTHERS TRUCK REPAIR, INC.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an 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)

The date of each amendment(s) adoption: _____
date this document was signed.

Effective date if applicable: _____

(no more than 90 days after amendment file date)

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TALLAHASSEE, FLORIDA

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted 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.

Dated August 14, 2013

Signature



(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Roy S. Cummings

(Typed or printed name of person signing)

President

(Title of person signing)