Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001947313)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: FASTKIT CORP

Account Number : I20100000009 Phone

: (305)599-0839

Fax Number

: (305)592-9591

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Emai?	Address:	•
	Huu ( 633 .	<del></del>

## COR AMND/RESTATE/CORRECT OR O/D RESIGN OLPE AUTOMOTIVE DISTRIBUTORS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

## Articles of Amendment

2022 JUH - 3 AH II: 06

	Articles of	Incorporation	SECH. ATE
	OF DE ALITOMOTIVE	of E DISTRIBUTORS,INC.	TALL NustrafL
(Name	<del></del>		
(KARII)		ntly filed with the Florida I	Dept. of State)
		0673	<del>-</del>
		r of Corporation (if known)	
Pursuant to the provisions of section 60 ts Articles of Incorporation:	7.1006, Florida Statutes, th	nis Florida Profit Corporatio	n adopts the following amendment(s
A. If amending name, enter the new	name of the corporation:		
N/A			77
name must be distinguishable and contai "Inc." or Co." or the designation "chartered." "professional association.	"Corp." "Inc." or "Co".	A professional corporation	The new ed" or the abbreviation "Corp.," n name must contain the word
3. Enter new principal office address	. If applicable:	N/A	
Principal office address MUST BE A.	STREET ADDRESS )	N/A	·
		N/A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
	<u> </u>	N/A	
		N/A	
. If amending the registered agent as new registered agent and/or the ne	nd/or registered office ad w registered office addre	dress in Florida, enter the s	name of the
Name of New Registered Agent	N/A	_	
	N/A		
	(Florido street address)		
New Registered Office Address:	N/A		, Florida
		(Ciny)	(Lip Code)
No. Doring of a second		•	
lew Registered Agent's Signature, if c hereby accept the appointment as regist	nanging Registered Agen	<u>t:</u> with and occupy the ablique	one of the marking
2 and the out appointment of (E83)	a eo ogem - r am jaminar	ivini ana acc <b>epi ine</b> obligani	ons of the position.
<del> </del>	Signature of New I	Registered Agent, if changing	<del></del>

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, Salty 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.

Frample:

X Change	<u>PT</u>	John Doe			
X Remove	Ā	Mike Jones			
X Add	<u>\$V</u>	Sally Smith	,		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address		
1) Change	VP	RUDY OLIVA	439 WEST 27 STREET		
X Add	-		HIALEAH, FL 33010		
Remove					
2) Change					
Add			· · · · · · · · · · · · · · · · · · ·		
Remove 3)Change		_			
Add					
Remove					
4)Change					
Add					
Remove					
5) Change					
Add					
Remove		* *	······		
6) Change					
Add					
Remove					

E. If amending or adding a (Attach additional sheets,	additional Articles, enter change(s if necessary). (Be specific)	i) here:	
NONE			
<del></del>			<del></del> -
<del></del>			<u> </u>
<del></del>			
<del></del>			
·			
	<u> </u>		
· <del></del>			
F. If an amendment provided provisions for implement (if not applicable, inc.)	tting the amendment if not contai	n, or cancellation of issued shares, ned in the amendment itself:	
RODOLFO OLIVA			
RUDY OLIVA	· · · · · · · · · · · · · · · · · · ·		<del></del>
<del></del>	<del></del>		
	<del></del>		
			<del></del>
<del></del>			
<del></del>			

JUNE 02, 2022	
The date of each amendment(s) adoption:	ther than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	ldਦਾ
☐ 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.	. 1
☐ 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	
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)  RODOLFO OLIVA	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_