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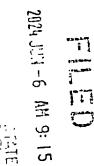
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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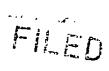
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Lube Center Distrib	uting, Inc.		
DOCUMENT NUME	BER:			
The enclosed Articles	of Amendment and fee are sub	mitted for filing.		
Please return all corres	pondence concerning this matt	ter to the following:		
	Kevin Orzel	-		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person		
	Lube Center Distributing, Inc.			
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
	620 NE 575th St.			
	Address			
	Old Town, Fl. 32680			
	City/ State and Zip Code			
	kvnorzel@gmail.com			
		ed for future annual report	notification)	
	n concerning this matter, pleas		540 W/O	
Kevin Orzel		at (_) 542-7631	
Name	of Contact Person	Area Coo	le & Daytime Telephone Number	
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	ertment of State:	
□ \$35 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Lube Center Distributing, Inc.			2024 3197 - 6	S ALL S
(Name	of Corporation as currer	itly filed with the Florida l	Dept. of State)) hi 9: 15
L71141			2 7 7	. Ota
	(Document Number	of Corporation (if known)		-,,=1
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporatio	n adopts the following am	endment(s) to
A. If amending name, enter the new n	ame of the corporation:			
N/A			The	e new
name must be distinguishable and contair "Inc.," or Co.," or the designation "Caterered," "professional association,"	Corp," "Inc." or "Co".	A professional corporation		
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
D. If amending the registered agent as	nd/on magistaned office ad	Idvace in Florida antar the	name of the	<u> </u>
new registered agent and/or the ne			name of the	
Name of New Registered Agent	Michael Orzel			
	620 NE 575th St.			
	(Florida .	street address)		
New Registered Office Address:	Old Town		, Florida 32680	
TEN NORDICIAN OFFICE THE TENEVERS.	, ,, 	(City)	(Zip Code)	,
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			itions of the position.	
·	-	-		
	2	2		
	Signature of New	Registered Agent, if changi	πο	

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.

A Change	1.1	<u> 10111 1200</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	ST	Julie Orzel	620 NE 575th St.
Add			Old Town, Fl 32680
Remove			
2) Change	ST	Julie Orzel	620 NE 575th St.
Add			Old Town, Fl. 32680
X Remove 3) Change	ST	Michael Orzel	620 NE 575th St.
X Add			Old Town, Fl. 32680
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ittach <i>addition</i>	d sheets, if necessary). (Be specific)	
1		
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lf an amendme	nt provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for	implementing the amendment if not contained in the amendment itself:	
(if not app	icable, indicate N/A)	
Λ		
		_
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		_
		_
		_

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amo	endment file date)
Note: If the date inserted in the document's effective date on the		iling requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directo	rs without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of vote sufficient for approval.	es cast for the amendment(s)
	approved by the shareholders through voting gro for each voting group entitled to vote separately	
"The number of votes of	ast for the amendment(s) was/were sufficient for	approval
by		
,	(voting group)	
sele	a director, president or other officer – if directors etted, by an incorporator – if in the hands of a recointed fiduciary by that fiduciary)	
	Kevin Orzel	
	(Typed or printed name of person	signing)
	PD	
	(Title of person signing)	