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SECRETARY OF STATE



AUG 0 8 2018 T. Lieu, Than

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: WHEELS OF MA	N M.C. OF SUWANNEE	COUNTY INC.
	BER: N18000004125	•	(1886 - 197 <u>-</u>
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	John Foster		
		Name of Contact Person	ר
		Firm/ Company	
	2621 NW 64TH TERR.		
		Address	
	MARGATE, FL 33063		
		City/ State and Zip Cod	e
john	bfoster2@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
John Foster		at (588-3175
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div	niling Address nendment Section vision of Corporations D. Box 6327	Amend Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301



July 12, 2018

JOHN FOSTER 2621 NW 64 TERR MARGATE, FL 33063

SUBJECT: WHEELS OF MAN M.C. OF SUWANNEE COUNTY INC.

Ref. Number: N18000004125

We have received your document for WHEELS OF MAN M.C. OF SUWANNEE COUNTY INC. and your check(s) totaling \$52.55. However, the enclosed document has not been filed and is being returned for the following correction(s):

The last page of the amendment is not included.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 918A00014373

RECEIVE

18 AUG -6 PH 12: 24

SECRETARY OF 2 (2)

TALLAHASSFE, FOX

Articles of Amendment to Articles of Incorporation

FILED

WHEELS OF MAN M.C. OF SUWANI	NEE COUNTY INC.		_	
(Name	of Corporation as current	ly filed with the Florida De	pt. of State) 2011 AUG - b	P #: 19
WHEELS OF MAN M.C. OF SUWANI	NEE COUNTY INC.			
	(Document Number o	of Corporation (if known)	SECRETARYS TALLAHASSEE.	l ST ATE FLORIDA
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation	adopts the following amendment	(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc." or '	"Co". A professional corpo	porated" or the abbreviation	
B. Enter new principal office address,	if annicable:	20461 97TH DRIVE		
(Principal office address MUST BE A S		O'BRIEN, FL 32071		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent as	OFFICE BOX)	lress in Florida, enter the na	ame of the	
new registered agent and/or the ne	w registered office address	<u>s:</u>		
Name of New Registered Agent	Donald Pittman			
	20902 SW Cardinal Ave.			
	(Florida str	reet address)		
New Registered Office Address:	Dunnellon, Fl.		. Florida	
		(City)	(Zip Code)	
EMAIL	fixerwomn	nc a acc. com		
New Registered Agent's Signature, if c I hereby accept the appointment as regis			ns of the position.	
	Signature of New F	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 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	DWAYNE PLASS	20461 97TH DRIVE
Add			O'BRIEN, FL 32071
X Remove			
2) Change	V	DERRICK VASQUEZ	20461 97TH DRIVE
Add			O'BRIEN, FL 32071
X Remove			
3) Change	P	RALPH ARLAND WILLIAMS	1320 NE 743 ST.
XAdd			Old Town, Fl. 32680
Remove			
4) Change	TRES	RODGER ORTIN CONTENTO	21661 SW 102nd ST.
XAdd			Dunnellon, Fl. 34431
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Mach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
an amondment muovidas for an orah	hange, reclassification, or cancellation of issued shares,
all allicituditell blosides for an exer	tange, rectassification, or cancenation of issued shares.
provisions for implementing the ame	endment if not contained in the amendment itself:
orovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
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provisions for implementing the ame	endment if not contained in the amendment itself:

date this document was signed.	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as artment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were su	ited by the shareholders. The number of votes east for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes east	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	ted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	ted by the incorporators without shareholder action and shareholder
Dated 8/2	2018
Signature	male Poth-
(By a di	ector, president or other officer - if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	Tonald Pittman (Typed or printed name of person signing)
	(1 yped or printed name of person signing)
	Registeral Agent
	(Title of person signing)