

P000000015023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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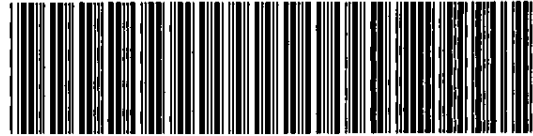
(Business Entity Name)

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12/14/11--01030--003 **43.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 21 PM 2:41

Amend/CC
@ 12/21/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AA ACCURATE TRUCK & TIRE REPAIR, INC.

DOCUMENT NUMBER: P00000015023

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

Please return all correspondence concerning this matter to the following:

JAMES PASCARELLI IV
Name of Contact Person

AA ACCURATE TRUCK & TIRE REPAIR, INC.
Firm/ Company

1644 N US #1
Address

ORMOND BEACH, FL 32174
City/ State and Zip Code

aaaccurate@cfl.rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Pascarelli III at (386) 615-0036
Name of Contact Person Area Code & Daytime Telephone Number

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

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 14, 2011

JAMES PASCARELLI, IV
AA ACCURATE TRUCK & TIRE REPAIR, INC.
1644 N. US #1
ORMOND BEACH, FL 32174

SUBJECT: AA ACCURATE TRUCK & TIRE REPAIR, INC.
Ref. Number: P00000015023

We have received your document for AA ACCURATE TRUCK & TIRE REPAIR, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE COMPLETE THE FORM IN ITS ENTIRETY.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 311A00027936

RECEIVED

11 DEC 21 AM 10:06

RECEIVED
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

AA ACCURATE TRUCK & TIRE REPAIR, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

P00000015023
(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 21 PM 2:41

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:

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

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) <u>D</u>	<u>James Pascarelli, IV</u>	<u>1644 N US #1</u> <u>ORMOND BEACH, FL 32174</u>
2) <u>D</u>	<u>ROSALIE PASCARELLI</u>	<u>1644 N US #1</u> <u>ORMOND BEACH, FL 32174</u>
3) <u>D</u>	<u>JAMES PASCARELLI, III</u>	<u>1644 N US # 1</u> <u>ORMOND BEACH, FL 32174</u>
4) _____	_____	_____ _____ _____
5) _____	_____	_____ _____ _____
6) _____	_____	_____ _____ _____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

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

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

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: 12/11/11

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 12/13/11

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)

JAMES PASCARELLI, III
(Typed or printed name of person signing)

DIRECTOR
(Title of person signing)