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JUN 35 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: MYRON	'S AUTO SER	VICE INC
DOCUMENT NUMBE	r: <u>Poo</u> c	000100977	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspe	ondence concerning this ma	tter to the following:	
	W.	YPON HAR IS O	and of the second
_		YRON HAMM O Name of Contact Person	ו ביין
_	MYRD	NS AUTO SER	NICE INC
_	2033 S	RIDGE WOOD Address	AVE
	EOGEWAT	FR FL 32 City/ State and Zip Code	<u>ઇ વા</u>
_	E-mail address: (to be us	YRONHAMM @	AOL · COM notification)
For further information	concerning this matter, pleas	se call:	
Myc	SON HAMMOND	at (_ 386	527 - 9199 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for (he following amount made	payable to the Florida Depa	artment of State:
S35 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		Amend	Address Iment Section
Division of Corporations P.O. Box 6327			on of Corporations entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

MYRON'S AUTO	SERVICE INC filed with the Florida Dept. of State)
· · · · · · · · · · · · · · · · · · ·	 - "
P P00000 1 (2097+ Corporation (if known)
(Document Number of	Corporation (11 known)
ursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
NOT APPLICABLE Time must be distinguishable and contain the word "corporation," "co	EThe new
ame must be distinguishable and contain the word "corporation," "collnc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	<u>~/~</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
. If amending the registered agent and/or registered office address: Name of New Registered Agent NOT	·
(Florida stre	vet address)
. /	
New Registered Office Address: \(\sqrt{\text{N}} \)	A
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	with and accept the obligations of the position.
Signature of the the	Zameron referre A countying
heck 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)

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: \underline{X} Change	PT John I	loc	
X Remove	V Mike.	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PD	MYRON HAMMOND	1980 WATERFURD ESTATES DR.
Add			NEW SMYRNA BEACH, FL 3216;
Remove			
2) X Change	ND	MATTHEW HAMMOND	1980 WATERFORD ESTATES DR.
Add			NEW SMYRNA BEACH, FL 32168
Remove 3) Change	STD	DANIELLE RUBINSON	1980 WATERFORD ESTATES DR.
X Add			NEW SMYRNA BEACH, FL
Remove			32168
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		- Indiana - Indi	
Add			
Remove			,

	onal Articles, enter chan cessary). (Be specific)			
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an amendment provides fo	r an exchange reclassific	ration or cancellation	of issued shares	
	the amendment if not co	ontained in the amen	iment itself:	
rovisions for implementing				
rovisions for implementing (if not applicable, indicat	'e N/A)			
rovisions for implementing				
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The date of each amendment(s) ac date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :	MAY 15 2020	
	(no more than 90 days after amendmen	nt 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 repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☑ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast flicient for approval.	for the amendment(s)
	roved by the shareholders through voting groups. T each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for approve	/al
by	(voting group)	_; <u>`</u>
	(voling group)	
	AY 15, 2020	
Signature	Musica Physimicans	
(By a di	rector, president or other officer - if directors or offi	
	, by an incorporator – if in the hands of a receiver, t	rustee, or other court
арропч	ed fiduciary by that fiduciary)	
	MYRON HAMMOND (Typed or printed name of person signing	
	(Typed or printed name of person signing	2)
	PRESIDENT DIRECTOR	
•	(Title of person signing)	