## P00 000 104529

(Re	questor's Name	)
(Ad	dress)	
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(Cit	y/State/Zip/Phor	ne #}
PICK-UP		MAIL
(Bu	siness Entity Na	ime)
(Do	cument Number	·)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	

Office Use Only

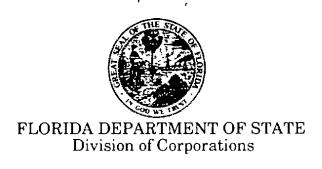


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August 22, 2021

ALISA ABDOOL 13080 SW 248TH ST UNIT 213 HOMESTEAD, FL 33032

SUBJECT: A B D AUTOMOTIVE, CORP

Ref. Number: P00000104529

We have received your document for A B D AUTOMOTIVE, CORP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6050.

Letter Number: 621A00020102

Irene Albritton Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) --(Document Number of Corporation (if known) 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) , Florida\_ New Registered Office Address: (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

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)

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				···-
5) Change		_		
Add				
Remove				
6) Change	<del> </del>	_		
Add				
Remove				

If amending of Attach addition	r adding additional Articles nal sheets, if necessary). (B	le specific)		
11,021.				
				-
	provides for an exch	ange, reclassificatio	n, or cancellation of issued shares, ned in the amendment itself:	
, <u>If an amer</u> provision	s for implementing the ame	ndment if not contai	ned in the amendment itself:	-01
(if no	t applicable, indicate N/A)	- of Kom	Feered Abdool 5	070
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to 48	0/0			
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nang	Shimes Fr.			
21019				

The date of each amendment(s) adoption:		
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 listed as to document's effective date on the Department of State's records.  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.  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		if other than the
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(voting group)	bv	
(1777) 6 5 11/		(voting group)
Signature Abdov  (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)	(By a directed, b	y an incorporator – if in the hands of a receiver, trustee, or other court
ALISA ABDOOL  (Typed or printed name of person signing)		
Owner Sec (Title of person signing)	<u>C</u>	