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Special Instructions to	Filing Officer:
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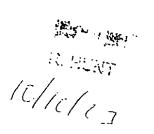
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DIVISION OF COMPOSITION



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Three Rivers Auto and RV	Sales
DOCUMENT NUMBER: <u>P00000 (0 5590</u>	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Mistry Weigel Name of Contact Person	
Firm/ Company	<u></u>
1721 E DUVAL ST Address Lake City FL. 32055 City/ State and Zip Code	
Address	
Lake City, Fl. 32055	
' City/ State and Zip Code	
E-mail address: (we used for future annual report notification)	<u>n</u>
For further information concerning this matter, please call:	
Misty Weigel at (23.9) 440 Name of Contact Person Area Code & Daytime) – 5985 Telephone Number
inclosed is a check for the following amount made payable to the Florida Department of Sta	
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 F Certificate of Status Certified Copy Certified (Additional copy is enclosed) (Addition is enclosed)	te of Status Copy nal Copy
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tall.Tallahassee, FL 323142415 N. Monroe S	tions ahassee

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

Three Rivers Auto and RV S	ales Inc
(Name of Corporation as currently t	
PD0000105590	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "cor" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A 7 "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1721 E Duvaist
	Lake City FL 32055
	202 202
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1721 E DUVA(St
	Lake City, F1 32055
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
Name of New Registered Agent MISTY Were	gel
9411 197 th R	d. Live Oak, FL. 32060
New Registered Office Address: 1721 E DUVA	1 St. Lake City Florida 32055 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Musty Weigel) istored Sport it changing

Check if applicable

 \Box 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; Cless = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 🖼 ce held. President, Treasurer, Director would be PTD. Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the PST and Mike Mike 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 Alike Junes V as Remove and Sally Smith SV as an Add Mike Jones, V as Remove, and Sally Smith, SV as an Add, Example: X Change PT John Doe X Remove $\underline{\mathsf{V}}$ Mike Jones \underline{X} Add <u>SV</u> Sally Smith Type of Action Title <u>Addres</u>s <u>Name</u> (Check One) Haria | Flanders 473 Richmond Way 1) ____ Change Fort While FL 32038 Add X Remove 473 Richmond Way Timothy A Flanders 2) ____ Change Fort White, FL. 32038 Add X Remove Change Oak FL 32060 X Add Remove 9411 1974 Rd Robert Weigel 4) ____ Change IVE DAK FL. 320100 X_{Add}

__ Remove

5) ____ Change

6) ____ Change

__ Add

Remove

__ Add

_ Remove

DEVISION OF CORPORALLING

The date of ead date this docum	ch amendment(s) ado ient was signed.	option:	, if other than the
Effective date	if applicable:	(no more than 90 days after amendment file date	
		(no more than 90 days after amendment file date	?)
		ock does not meet the applicable statutory filing requirement artment of State's records.	nts, this date will not be listed as the
Adoption of A	mendment(s)	(<u>CHECK ONE</u>)	
The amenda action was n	nent(s) was/were adop not required.	ted by the incorporators, or board of directors without sharel	holder action and shareholder
	nent(s) was/were adop cholders was/were suff	ted by the shareholders. The number of votes east for the an ficient for approval.	nendment(s)
		oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendme	
		ach whing group entinea to vote separately on the amename	ent(s):
"The n	number of votes cast fo	or the amendment(s) was/were sufficient for approval	ent(s):
"The n	number of votes cast fo	or the amendment(s) was/were sufficient for approval	2 9
	number of votes cast fo		2 9
	Dated	(voting group) 2023	DIVISION OF CO
	Dated 9	(voting group) Lof 2023 Mustin Weigel	DIVISION OF COR
	Dated Signature (By a dire	(voting group) (voting group) (voting group) Mustin Weigel ector, president or other officer - if directors or officers have	DIVISION OF COR
	Dated	(voting group) Lof 2023 Mustin Weigel	DIVISION OF CORPURA