# 101000035821

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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	ON: RUSTY MOYE A	AUTO SALES & SERVICE	E CENTER, INC.		
DOCUMENT NUMBER:	P01000035821				
The enclosed Articles of An	nendment and fee are sul	bmitted for filing.			
Please return all correspond	ence concerning this mat	tter to the following:			
RUS	TY MOYE				
		Name of Contact Persor	1		
RUS	RUSTY MOYE AUTO SALES & SERVICE CENTER, INC.				
	<u> </u>	Firm/ Company			
6340	N PALAFOX ST	Time Company			
		Address			
PEN	SACOLA FL 32503				
<u></u>		City/ State and Zip Code			
For further information con-	, i	ed for future annual report	notification)		
RUSTY MOYE		at (	476-5575		
Name of Co	ntact Person		de & Daytime Telephone Number		
Enclosed is a check for the	following amount made p	payable to the Florida Depa	ertment of State:		
■ \$35 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)		
Division o P.O. Box	ent Section of Corporations	Amend Divisio Clifton 2661 E	Address Iment Section In of Corporations Building Executive Center Circle Insee, FL 32301		

#### Articles of Amendment to Articles of Incorporation

#### RUSTY MOYE AUTO SALES & SERVICE CENTER, INC.

## (Name of Corporation as currently filed with the Florida Dept. of State) P01000035821 (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

A. If amending name, enter the new name of the corporation: 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: WM RUSSELL MOYE Name of New Registered Agent 6340 N PALAFOX ST (Florida street address) PENSACOLA New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

its Articles of Incorporation:

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

(City)

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	PT	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	JOSHUA R MOYE	1215 EAST STRONG STREET
Add			UNIT B
X Remove			PENSACOLA FL 32501
2) Change	<u>T</u>	PORTIA A WHITE	6340 N PALAFOX ST
X Add			
Remove			PENSACOLA FL 32503
3 ) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del></del>	
	<del></del>
<u></u>	
6	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an end in the amendment itself:
(if not applicable, indicate N/A)	
· ·	
	<del></del>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file of	<del></del>
(no more than 90 days after amendment file o	late)
Note: If the date inserted in this block does not meet the applicable statutory filing requirer document's effective date on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amendation.	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	nd shareholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and slaction was not required.	nareholder
Dated	
Signature Resident or other officer – if directors or officers h	
(By a director, president or other officer – if directors or officers he selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	or other court
Wm Resellother	
(Typed or printed name of person signing)	
and pres.	
(Title of person signing)	