Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000185273 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)617-6380

From:

Account Name

: EXPRESS CORPORATE FILING SERVICE

Account Number: I20000000146

Phone

: (305)444-4994

Fax Number

: (305) 444-4977

er the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

COR AMND/RESTATE/CORRECT OR O/D RESIGN BRICKELL COMPLETE AUTO SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

JUL-20-2011 WED 11:47 AM

Articles of Amendment to Articles of Incorporation

BRICKELL COMPLETE AUTO SERVICES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P01000100579 (Document Number of Corporation (if known)

A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "cor	The new
abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or name must contain the word "chartered," "professional association," or the a	"Co". A professional corporation
B. Enter new principal office address, if applicable:	F. C.
(Principal office address MUST BE A STREET ADDRESS)	JUL 20 NHASS
·	10 m
	- STA
C. Enter new mailing address, if applicable:	25 ?
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Flo	wide enter the name of the
new registered agent and/or the new registered office address:	aton, enter two mante or the
Name of New Registered Agent:	
·	·ss)
New Registered Office Address: (Florida street addre	•
New Registered Office Address: (Florida street addre	Florida
	, Florida (Zip Code)
New Registered Office Address: (Florida street address: (City) New Registered Agent's Signature, if changing Registered Agent:	, Florida (Zip Code)

Page 1 of 3

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) Title Name -Type of Action Address. **VPD** Roberto Suarez Solis DbA 🖸 4449 SW. 136 PLACE Remove MIAMI, FL 33175 ☐ Add □ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (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)

Page 2 of 3

The date of each amendmen	t(s) adoption: JULY 8, 2011
Effective date if applicable:	JULY 8, 2011 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	ere approved by the shateholders through voting groups. The following statement and 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
Dated_JUL	
(By sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)
•	ROLANDO ARMENGOL
	(Typed or printed name of person signing)
	PRESIDENT PRESIDENT
	(Title of person signing)

Page 3 of 3