## P02000022053

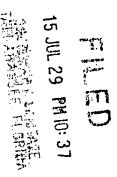
(F	Requestor's Name)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	1 24	•		, ************************************	
NAME OF CORPORATION:	NEIGHBORHO	OD TIRES, INC.			
DOCUMENT NUMBER:	P02000022053				
The enclosed Articles of Amendm	uent and fee are su	abmitted for filing.			工物
Please return all correspondence c	oncerning this ma	atter to the following:			器所
ANGEL D.	CORDOVA				7.
		Name of Contact	Person		
ANGEL D.	CORDOVA & C	CO.			
<del></del>		Firm/ Compa	ny		
780 N.W. 4	2 AVE STE 32	.5			
<del></del>		Address			
MIAMI, FI	. 33126				
<del></del>		City/ State and Zi	p Code		
AR@ACORDO	VA.COM				
<del>-</del>		sed for future annual	report not	tification)	-
For further information concerning	g this matter, pleas	se call:			
ANGEL D. CORDOVA		at (	)	444-5511	
Name of Contact P	erson	Aı	rea Code	& Daytime Telephone Nu	ımber
Enclosed is a check for the following	ing amount made	payable to the Florida	a Departm	nent of State:	
	75 Filing Fee & ificate of Status	\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addres Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations	- <del>-                                  </del>	Division o Clifton Bu	nt Section f Corporations	

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

(Name of Cor	oration as currently filed with the F	lorida Dept. of State)	5 M. 1
P02000022053			O.
(	Document Number of Corporation (if k	nown)	7
rsuant to the provisions of section 607.1006, Articles of Incorporation:	Florida Statutes, this Florida Profit Con	poration adopts the follow	wing amendment
If amending name, enter the new name of	the corporation:		
'A			_The new
me must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation rd "chartered," "professional association,"	'Corp," "Inc," or "Co". A professio		
Enter new principal office address, if app			<del> </del>
incipal office address <u>MUST BE A STREE</u>	<u> </u>		
Enter new mailing address, if applicable	N/A		
(Mailing address MAY BE A POST OFFIC	<u></u>		<del></del>
If amending the registered agent and/or r		ter the name of the	
new registered agent and/or the new regis	tered office address:		
Name of New Registered Agent N/A			
	(Florida street address)		
27/1			
New Registered Office Address: N/A		, Florida	

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) X Change	P	JULIUS MEDINA	4777 NW 183 ST.
Add			MIAMI, FL 33055
Remove			
2) X Change	v	ALBERTO MEDINA	4777 NW 183 ST.
Add			MIAMI, FL 33055
Remove			
3) Change		######################################	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change	<del>- 1,1;</del>		<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
N/A	
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares.  Inducent if not contained in the amendment itself
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares.  and and an it is an end in the amendment itself.
if not applicable. indicate N/A	ange, reclassification, or cancellation of issued shares.  ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself.
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself.
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:

Effective daté <u>if aphlicable</u> :		
•	(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 the document's effective date on the Department of State's records.		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
hu		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	122-2015 Juin Ullian	
	director, president or other officer - if directors or officers have not been sted, by an incorporator - if in the hands of a receiver, trustee, or other court	
	inted fiduciary by that fiduciary)	
	MIRIAM MEDINA	
	(Typed or printed name of person signing)	
	.ECRETARY/TREASURER	
	Title of person signing)	