## P02000095019

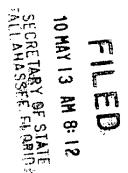
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Amend.

BA GOMMENTAL MAY 1 8 2010

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: O & L AUTO BODY REPAIRS DOCUMENT NUMBER: x P0200095019 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: OERRICK STEPHENSON Name of Contact Person DA L AUTO BODY REPAIRS Firm/ Company N.W. 141 ST Áddress City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number DERRICK STEPHENSON Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■ \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Citale
Tallahassee, FL 32301

 $\hat{j}$ 

(Additional Copy is enclosed)

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with t	he Florida Dent of State)	Mo 3
·		The sign of
► P02 0000 950 19 (Document Number of Corporati		35 5
(Document Number of Corporati	on (if known)	57
ursuant to the provisions of section 607.1006, Florida Statutemendment(s) to its Articles of Incorporation:	es, this Florida Profi: Corporation	on adopts the following
. If amending name, enter the new name of the corporation	n:	
MA ame must be distinguishable and contain the word "corp		The new
ame must be distinguishable and contain the word "corplibbreviation "Corp.," "Inc.," or Co.," or the designation "Co ame must contain the word "chartered," "professional associa	orp," "Inc," or "Co". A professi	ional corporation
B. Enter new principal office address, if applicable:	2043 N.M. 141 ST STR.	έtτ
Principal office address <u>MUST BE A STREET ADDRESS</u> )	•	
	OPA LOCKA FL	
	220 -	
	33054	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2043 N.W. 141 ST STRE	et_
	OPA LOCKA, FL 33054	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		ne of the
Name of New Registered Agent:	NA	
	NA da street address)	
New Registered Office Address: (Florida)	da street address)	
	Elorido	
(City)	//A, Florida ( .ip Code)	<u>~//#</u>
(0.1)/	( :	
www. Registered Agent's Signature, if changing Registered A	gent:	
hereby accept the appointment as registered agent. I am fami	liar with and accept the obligation	s of the position.
	da	
	N/A Registered Agent, if changing	

## 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
_wla_	NIA	N/A N/A N/A	
_N/A_	~/A	NA NA NA	
N/A	N/a	Na	
	nding or adding additional Articles, eadditional sheets, if necessary). (Be s		
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provis	imendment provides for an exchange ions for implementing the amendmenting the amendmenting the amendment applicable, indicate N/A)		
	Nla		
	, NA		
	Nla		
	NIn		

The date of each amendment	(s) adoption:
a. + + 5	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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	.// A
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
sele	Want -
·	* Ot RRILK STEPHENSON  (Typed or printed name of person signing)
	X OWNER - DIRECTOR (Title of person signing)
	(Title of person signing)