# P02000135368

(Re	questor's Name)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporation	
NAME OF CORPORA	TION: City Tire Service of Leesburg, INC
DOCUMENT NUMBE	R: PO2000135368
The enclosed Articles of	Amendment and fee are submitted for filing.
Please return all corresp	ondence concerning this matter to the following:
	Mac Bleakley  Name of Connact Person  City Tire Service
_	Name of Contact Person
	City Tire Service
_	Firm/Company 1740 U.S. Hwy 441
_	Leesburg, F1 34748
_	City/ State and Zip Code
	citytireleesburge embargmail.com
_	E-mail address: (to be used for future annual report notification)
For further information	concerning this matter, please call:
Mac	Bleckley at (352) 787-1155  Contact Person Area Code & Daytime Telephone Number
Name of	Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for	the following amount made payable to the Florida Department of State:
S35 Filing Fee	☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)

## Mailing Address

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

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### Articles of Amendment

**Articles of Incorporation** 

	_	of	_		
City	Tire	Service	s f	Leesburg,	Inc

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

P02000135368 (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

your must be distinguishable and contain the word "o	orporation:  Orporation," "company," or "incorporated" or the abb	The nev
The.," or Co.," or the designation "Corp," "Inc., "or Co.," or the designation "Corp," "Inc., "chartered," "professional association," or the abbre	" or "Co". A professional corporation name must	contain the wor
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	~/A	2020
	<del></del>	
		• 1
D. If amending the registered agent and/or registered new registered agent and/or the new registered  Name of New Registered Agent	red office address in Florida, enter the name of the office address:	14 10: 31
new registered agent and/or the new registered		(Zip Code)
new registered agent and/or the new registered  Name of New Registered Agent  New Registered Office Address:  New Registered Agent's Signature, if changing Reg	(Florida street address)  (City)	(Zip Code)

<sup>☐</sup> 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; 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	Bleakley, Robert LSR	1740 = Main St Leesburg, Fl 34748
Add			Leesburg, Fl 34748
X Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			<del></del>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additio	or adding additional anal sheets, if necessa	ry). (Be specific)			
			N/A		
			t		
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If an amendm	ent provides for an or implementing the	exchange, reclassi	fication, or cancell contained in the a	<u>ation of issued shar</u> mendment itself:	<u>es.</u>
(if not ap	plicable, indicate N/A	A)			
		~/	' <del>A</del> -		
				<del></del>	
	<del></del> : <del></del> -				
			<del></del>	<del></del>	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	es after amendment file date)
Note: It' the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board action was not required.	l of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	flicient for approval
by Board of directors (voting group)	<u>.</u>
(voting group)	
Dated8-11-2020 Signature8-11-2020	<del>_</del>
Signature Mc Lood Blen	Blay, Pres.
(By a director, president or other officer – selected, by an incorporator – if in the har appointed fiduciary by that fiduciary)	if directors or officers have not been
McLeod	Bleokley
(Typed or printed name	
Pres	
(Title of person signing	2)