

PD3000058374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Corrected document
by telephone call
TR 10-19-10

Office Use Only



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10/01/10--01017--005 **35.00

Amens

FILED
10 OCT 18 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
10 OCT 18 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 1, 2010

CHRISTOPHER DAVIS
MASTER TECH AUTO ELECTRIC INC
1309 W VINE ST
KISSIMMEE, FL 34741

SUBJECT: MASTER TECH AUTO ELECTRIC, INC.
Ref. Number: P03000058374

We have received your document for MASTER TECH AUTO ELECTRIC, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 410A00023369

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Master Tech Auto Electric Inc

DOCUMENT NUMBER: P03000058374

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NORMA DAVIS
Name of Contact Person

Master Tech Auto Electric
Firm/ Company

1309 W. Vine St.
Address

Leissimnee FL 34741
City/ State and Zip Code

Master58FL@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NORMA DAVIS at (407) 933-8324
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:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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)

FILED

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President	Eduardo Davis	2410 Flamingo St St Cloud, FL 34771	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
	Davis, Christopher	2410 Flamingo St St Cloud, FL 34771	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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)

The date of each amendment(s) adoption: October 11, 2010

Effective date if applicable: July 30 2010
(date of adoption is required)
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

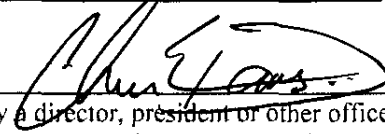
"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/11/10

Signature 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Christopher DAVIS
(Typed or printed name of person signing)

President/Agent
(Title of person signing)