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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Mercedes Complete Service & Repair, INCO  DOCUMENT NUMBER: # PD3000092348
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
James Zuppelli Name of Contact Person  M Complete Auto Remie INC.
M Complete Auto Repair, INC. Firm/Company 4411 North Lois Avenue Address
Tampa, FL City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James Zuppelli at (813) 870.1250  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:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

	Articles of Amendment		WIO AMILED
	to	2812	
•	. Articles of Incorporation		N, " ()
	of	475000	· 10
MERCEDES Com	plete Service And	L REPAIR AND	Br. Mallic
(Name of Corporation as curre	ntly filed with the Florida Dept. of	State)	Ex Open
# P 1200 009:	324Q.		170076
Oocument Num	ther of Corporation (if known)		- ''10 <sub>A</sub>
,	• , ,		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Co	orporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of	the corporation:		
M Complete	e Auto Repair	INC	The new
name must be distinguishable and contain the	ne word "corporation," "company,"	or "incorporated" or the a	_1 ne new abbreviation
"Corp.," "Inc.," or Co.," or the designation	"Corp," "Inc," or "Co". A professi	onal corporation name must	contain the
word "chartered," "professional association,"	or the abbreviation "P.A."		
B. Enter new principal office address, if appl	licable:		
(Principal office address MUST BE A STREE			_
		· · · · · · · · · · · · · · · · · · ·	_
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFI</u> C	CE BOX)		_
			_
	<u></u>		_
D. If amending the registered agent and/or r new registered agent and/or the new registered.		enter the name of the	
new registered agent antwor the new regis	tered office address.		
Name of New Registered Agent			
-	(Florida street address)		
	(1 sorran biroti dan obj)		
New Registered Office Address:		, Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	ng Registered Agent:	and the second second	
I hereby accept the appointment as registered a	gent. I am familiar with and accept t	ne obligations of the position.	
Signatur	e of New Registered Agent, if changin	g	

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> <u>John</u>	t Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove	PT	James Zuppelli	4411 North Lois Ave. Tampa, FL 33614
2) Change Add Remove	VS	Michael La Monte	4411 North Lois AUE. TAMPA, FL 33614
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove		<del></del>	*
6) Change Add Remove	alah Militar da kabupatan sa masa sa m		

. <u>If</u>	amending or adding additional Articles, enter change(s) here:
( a <i>t</i>	tach additional sheets, if necessary). (Be specific)  Many es Should be noted in the following manner
	Michael Lamonte is currently Listed as
,	VTS. Michael LaMonte Will now be Vs.
	James Zuppelli is currently listed as P.
	James Zuppelli will now be PT.
	Michael LAMonte Will be REMOVED from T.
	Therefore Changes should be noted as
	James Zuppelli is now PT.
	James Zuppelli is now PT. Michael Lamonte is now VS.
	Thankyou
-	
If :	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
	rovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
	(y not applicable, malcale 11/1)
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The date of each amendment(s) adoption: 6.15.2012		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more inan 90 days after amenament fite date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
	the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated	5.2012 us Binnolle	
(Bý a dire selected, t	ctor, president of other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court induciary by that fiduciary)	
<u>-</u> -	TAMES ZUPPELLI (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	