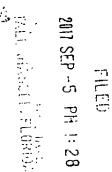
## P03000141158

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	   MAIL 
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	s
Special Instructions to Filing Officer:	
Office Use Only	



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C. GOLDEN SEP - 7 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION:	EWING PARKING,		
DOCUMENT NUM	BER:	P03000141158		
The enclosed Articles	of Amendment and fee are	submitted for filing.		
Please return all corre	spondence concerning this	matter to the following	ng:	
	JANOS DEMKO			
	DEMKO PARKING, INC	Name of Cont	act Person	
		Firm/ Cor	npany	
	4088 W. PALM AIRE DR	IVE APT.23		
		Addre	ess	
	POMPANO BEACH, FL	33069		
		City/ State and	Zip Code	
	janosdemko@comca	ast.net		
	E-mail address: (to be	used for future annu	ual report	notification)
For further information	on concerning this matter, pl	lease call:		
JANOS	S DEMKO	at (	754	_)264-2681
Name	of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount ma	 de payable to the Flo 	orida Depai	rtment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status		- Py	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314		Amenda Division Clifton 2661 Ex	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

2017 SEP -5 PM 1:28

DEMKO PARKING, INC.		
(Name of Co	orporation as curre	ntly filed with the Florida Dept. of State)
P03000141158		The Light Steel FLORIS
	(Document Numbe	r of Corporation (if known)
		( of Corporation (it known)
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	i, Florida Statutes, th	nis Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name	of the corporation:	
N/A		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," oi	ntion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the
B. Enter new principal office address, if ap	nlieable:	N/A
(Principal office address MUST BE A STRE		
	i i	
C. Enter new mailing address, if applicable		N/A
(Mailing address <u>MAY BE A POST OFF</u>	<u>ICE BOX</u> )	
D. If amending the registered agent and/or	registered office a	ddress in Florida, enter the name of the
new registered agent and/or the new reg		
	N/A	
Name of New Registered Agent		
	(Florida	street address)
New Registered Office Address:	ļ	, Florida
New Registered Office Address.	ii	(City) (Zip Code)
New Registered Agent's Signature, if chang	zing Registered Age	ent:
I hereby accept the appointment as registered	agent. I am familie	ar with and accept the obligations of the position.
	ļ.	
	Signature of New	w Registered Agent, if changing

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V= Vice I Executive Officer; CFO = held. President, Treasurer Changes should be noted	and/or D if necess ector titl President Chief I Directo in the for	irector being ary) e by the first le ; T= Treasure Financial Offic or would be Pl lowing manne orporation, Sa	added:	irector being removed and title, name, and ustee; $C = Chairman \text{ or } Clerk$ ; $CEO = Chief$ an one title, list the first letter of each office ST and Mike Jones is listed as the V. There is would be noted as John Doe, PT as a Change.
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nac</u>	<u>de</u>   	Address
1) Change	V	J <del></del>	ON MAURICIO GAITAN	4510 BROOK DRIVE
X Add				WEST PALM BEACH, FL
Remove				33417
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_	1	
Add				
Remove				
6) Change		_		

\_\_ Add

\_\_\_\_ Remove

E. If amending or adding additional Articl	les, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
N/A	
F. If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	idment if not contained in the amendment itself:
N/A	

N/A'  The date of each amendment(s) adoption:  date this document was signed.  if other than the
Effective date if applicable: (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 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
O8/15/2017 Dated
(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)
JANOS DEMKO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)