P04000041795

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	idress)	
(Cit	y/State/Zip/Phone	#)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend.
18
8/21

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: P04000041793 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DAVI O KIUERA
(Name of Contact Person) NCD INC. DBA-CATALINA AUTO SALES 1630 EAST TALO BROWSON HAY
(Address) KISSIMMEE 76-34799 (City/ State/ and Zip Code) For further information concerning this matter, please call: at (<u>407</u>) <u>483-058/</u> (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & \$52.50 Filing Fcc Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallakasses, FL 32314

is enclosed)

Street Address

Amendment Section

409 E. Gaines Street

Taliakasses, FL 32399

Division of Corporations

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

Articles of Amendment to Articles of Incorporation

of
N.C.D. INC-
(Name of corporation as currently filed with the Florida Dept. of State)
P04000041795
(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 its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ARTICLES XI a. Anoudrout pol
OFFICERS.
Add OFFICER, OWNER TO
CORPORATION. DAVID RIVERA OF
512 CARLSHAD DR. KISSIMMEE, 71-34758
AS THE SECRETARY, TREASURER OF
N.C.D. INC.
(Attach additional pages if necessary)
If an amendment provides for 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: Augus T 16, 2004
Effective date if applicable: AUGUS To than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved 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.
Signed this 17th day of August 2004.
Signature Access 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)
DAUL RIVERA (Typed or printed name of person signing)

FILING FEE: \$35