# DSDDDDY4669

(Requestor's Name)	
(Address)	·
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
, (Document Number)	
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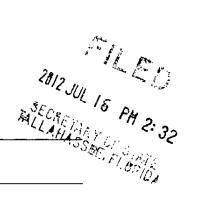
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ASAP Whe	els, Inc	
DOCUMENT NUMB	DOEOOOOAAGG	9	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	Vanice B Serrance	)	
·		Name of Contact Persor	ı
	ASAP Wheels, In	С	
	<u> </u>	Firm/ Company	
	10053 103rd Stre	et	
•		Address	
	Jacksonville, Flor	ida 32210	
		City/ State and Zip Code	e
asa	ipwheels@gmail.d		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Vanice B. Se	rrano	at (904	591-0225
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, F1, 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

# Articles of Amendment **Articles of Incorporation**



# ASAP Wheels, Inc

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

## P05000044669

dment(s) to

(Document Number of	of Corporation (if known)		
ursuant to the provisions of section 607.1006, Flori Articles of Incorporation:	ida Statutes, this <i>Florida I</i>	Profit Corporation adop	ts the following ame
If amending name, enter the new name of the	corporation:		
me must be distinguishable and contain the wo "orp." "Inc.," or Co.," or the designation "Con ord "chartered," "professional association," or th	rp." "Inc." or "Co". A		
Enter new principal office address, if applicable incipal office address MUST BE A STREET AL		, ,,	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>		
If amending the registered agent and/or regist new registered agent and/or the new registere		orida, enter the name	of the
Name of New Registered Agent			
	(Florida street addres	s)	
New Registered Office Address:		, Florida	(Zip Code)
	(City)		(Zip Code)
ew Registered Agent's Signature, if changing Ro			
nereby accept the appointment as registered agent.	i am familiar with and c	iccept the obligations of	t the position.
<del> </del>	A		

Signature of New Registered Agent, if changing

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.

X Change	PT	John D	oe	
X Remove	<u>V</u>	Mike J	ones .	
<u>X</u> Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) 🔀 Change	Р		Vincente Serrano Velasco	10053 103rd Street
Add				Jacksonville, Florida 32210
Remove				
2) Change		_		
Add				
Remove				
3) Change		<u>.</u>		
A <b>d</b> d				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	dditional sheets, i	if necessary).	(Be specific)	$\wedge$			
DNLY	LORRECTS	NG THE	Name C	F TRE	SIOGNT	<del>-</del>	
THE	DIRECTOR	2 WILL	STAY	IHE	SAME.	LNO CHA	NGE)
	· -			<del></del>			
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				-			·
	··						
							,
f an amo provisio	endment providens for implemen	es for an excha nting the amen	inge, reclassif dment if not c	ication, or ontained	· cancellation : in the amend:	of issued share nent itself:	<u>s.</u>
$\int_{\mathbf{A}}^{(ifn)}$	tot applicable, in	dicate N/A)					
<del>/</del>							
		-	J				

The date of each amendment(s) a	dontion: Tholiz
	7/0/12-
ffective date <u>if applicable</u> :	(no more than 90 days after amendment file datc)
adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder . opted by the incorporators without shareholder action and shareholder
•	7/10/12
Signature	miel B Somme
	lirector, president or other officer – if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)
	Vanice B. Serrano
	(Typed or printed name of person signing)
	Director
	(Title of person signing)