

P05000086182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

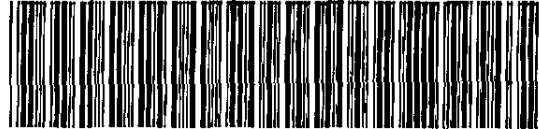
☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JUL -7 AM 9:48
**35.00

07/07/05--01025--001

Special Instructions to Filing Officer:

Sylvia Koussodentis Add
AUTHORIZATION BY PHONE TO RA
Date of Adoption 07/12/05 Name RA
DATE 07/12/05 Address RA
BOB. EXAM Dr. Bell

Office Use Only

Amendment
07/12/05
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ASKAN HONEST MECHANIC, INC
(Name of corporation)

DOCUMENT NUMBER: POS000086182

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

VITA SPREMULLI
(Name of contact person)

ASKAN HONEST MECHANIC, INC
(Firm/Company)

1821 LEE STREET
(Address)

HOLLYWOOD FL 33020
(City/state and zip code)

For further information concerning this matter, please call:

SYLVIA KOUTSOPOENTIS at (954) 924-1571
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

ASKANHONEST MECHANIC, INC.
(Name of corporation as currently filed with the Florida Dept. of State)

PC5000086182
(Document number of corporation (if known))

FILED
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DIVISION OF CORPORATIONS
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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)**

DELETE FRANK SPREMULLI (P)

16221 NW 9 DRIVE

PEMBROKE PINES, FL 33028

ADD VITA SPREMULLI (P)

16221 NW 9 DRIVE

PEMBROKE PINES, FL 33028

(SEE ATTACHED)

(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 new registered agent shall be: Vita Spremulli at 1821 Lee Street,
Hollywood, FL 33020-2406.

I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND
RESPONSIBILITIES AS REGISTERED AGENT FOR *ASKANHONEST*
MECHANIC, INC.

✓ Vita Spremulli
(Signature of Registered Agent)

The date of each amendment(s) adoption: 6/21/2005

Effective date if applicable: 6/21/2005
(no more 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 21 day of JUNE, 2005.

Signature ✓ Vita Spremulli
(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)

VITA SPREMULLI
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILING FEE: \$35