Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180001368593)))



H180001368593ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name R WHITE

: LEGALINC CORPORATE SERVICES INC.

Phone

Account Number : I20180000011 : (844)386-0178

MAY 02 2018 Fax Number : (214)317-4754

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ROAD RUNNER TIRES & WHEELS INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

To: 18506176380 From: 12143052508 Date: 05/01/18 Time: 11:59 AM Page: 02/05 (((III80001368593)))

18 MAY -1 AM 8: 48

ROAD RUNNER TIRES & WHEELS	INC		
	of Cornoration as current	ly filed with the Florid	Dent, of State)
P05000118014			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this	Florida Profit Corpora	ion adopts the following amendment(s)
A. Homonding name, enter the new 1	name of the cornoration;		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the designword "chartered," "professional associations."	nation "Corp," "Inc," or "	'Co". A professional co	The new recorporated" or the abbreviation proporation name must contain the
B. Enter new principal office address. (Principal office address <u>MUST BE A.S</u>		· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if apple (Mailing address MAY BE A POST) D. If amonding the registered agent an new registered agent and/or the ne	OFFICE BOX) ad/or registered office addi	ess in Florida, enter th	e namo •f the
Name of New Registered Agent	ph. page 4	14 -8 - 10-11 10-11	Mangaga
	2982 Michigan Ave		
	(Florida str	et address)	
New Registered Office Address:	Kissimmee	·	, Florida 34744
		(City)	(Zip Code)
New Registered Agent's Signature, if e hereby accept the appointment as regist	hanging Registered Agent:		, , ,
•	Signature of New R	egistered Agent, if chang	ing

To: 18506176380 From: 12143052508 Date: 05/01/18 Time: 11:59 AM Page: 03/05

(((H180001368593)))

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)

Example:

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	<u>oe</u> .	
X Remove	Y Mike J	ones	
X Add	SV Saily S	with	
Type of Action (Check One)	Title	Name	<u>Address</u>
i) Change			
Add			
Remove			
2) Change	· · · • • • · · · ·		
Add			
Remove			
3)Change			
Add			P*-1-1
Remove			
4) Change			
Add			
Remove			•
5) Change			
, Add			
Remove			
6) Change			
Add			
Remove		-	
- Ketnove		-	

(((H180001368593)))

Attach additiona	adding additional i I sheets, if necessar	y). (Be specific)				
	-					,
					·	
 					······································	
						 -
		·				
					_ .	
—						
royisions for he	provides for an ex	nendment if not c	cation, or cane contained in the	enation of issue amondment its	cif;	
(if not applic	able, Indicate N/A)					
					······································	
						
						
	·····					

		(//11/000012/050/2)
		(((H18000136859 3)))
The date of each amendment(s) add date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days q	fler amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep		tutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the sharoholders was/were suff		of votes east for the amendment(s)
The amendment(s) was/were appro- must be separately provided for ea	oved by the shareholders through voti ach voting group entitled to vote sept	
"The number of votes cast fo	r the amendment(s) was/were sufficie	ant for approval
by	(voting group)	
,	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without	shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ed by the incorporators without share	cholder action and shareholder
May 1, 2018		•

To: 18506176380 From: 12143052508

Date: 05/01/18 Time: 11:59 AM Page: 05/05

(Title of person signing)

(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

(Typed or printed name of person signing)

appointed fiduciary by that fiduciary)

Orlando Rivero

President