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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Collision C	One, Inc.			
DOCUMENT NUMBER: P0600010	5121			
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning th	nis matter to the following:			
	onald N. Mann, Jr. of Contact Person)	··		
(,			
(F	Collision One, Inc. (Firm/ Company)			
396	62 NE 5th Terrace (Address)			
	,			
	and Park, FL 33334			
•	State and Zip Code)			
For further information concerning this matter,	, please call:			
William C. Mann	at (954) 567-5671	Mar Norman		
(Name of Contact Person)	(Area Code & Daytime	relephone Number)		
Enclosed is a check for the following amount r	nade 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	cle		

Articles of Amendment to Articles of Incorporation of

Collisio	n One, Inc.	
(Name of Corporation as currently		tate)
P06009	0105121	m mg
	of Corporation (if known)	7.0
rsuant to the provisions of section 607.1006, Flowing amendment(s) to its Articles of Incorporation		t Corporation ad
If amending name, enter the new name of the	e corporation:	
new name must be distinguishable and corporated" or the abbreviation "Corp.," "In o". A professional corporation name nociation," or the abbreviation "P.A."	nc.," or Co.," or the designation	"Corp," "Inc," or
Enter new principal office address, if applica incipal office address <u>MUST BE A STREET A</u>	able: (DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>)	
If amending the registered agent and/or reginew registered agent and/or the new register		nter the name of th
Name of New Registered Agent:		_
New Registered Office Address:	(Florida street address)	
	(City)	, Florida (Zip Code)
w Registered Agent's Signature, if changing l		(zip code)
vereby accept the appointment as registered as		110

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)

Title	<u>Name</u>	Address	Type of Action
VP, D	Shawn M. Thompson	1034 SW Bianca Avenue Port Saint Lucie, FL 34953	
			□ Add □ Remove
			Remove
F Ifamend	ling or adding additional Articles on	tor abanga(s) bara:	
	ling or adding additional Articles, en lditional sheets, if necessary). (Be sp		
			
 			
F Ifan an	nendment provides for an exchange,	reclassification or consollation of	issued shares
<u>provisio</u>	ons for implementing the amendment of applicable, indicate N/A)	if not contained in the amendmen	nt itself:
		<u> </u>	
			<u> </u>
			
<u></u>			

The date of each amendmen	t(s) adoption: September 18, 2008
Effective date if applicable:	September 18, 2008
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemer led for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated_12/1:	2/2008
(By sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	William C. Mann
	(Typed or printed name of person signing)
	President President
	(Title of person signing)

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Amendments to Articles of Incorporation For COLLISION ONE, INC.

Article II amended to hereby read:

The principal place of business address:

3962 NE 5th Terrace Oakland Park, FL 33334

The mailing address of the corporation is:

3962 NE 5th Terrace Oakland Park, FL 33334

Article IV amended to hereby read:

The number of shares the corporation is authorized to issue: 120

Issue 20 shares of stock effective date March 29, 2007 In accordance with Resolution No. 07-01 of Collision One, Inc.

Article V amended to hereby read:

The name and Florida Street address of the registered agent is:

Michael J. Styles, P.A. 507 SE 11 Court Ft. Lauderdale, Fla. 33316

Effective date December 10, 2008

Officer/Director Detail:

Mann, William C P, D Mann, Jr. Donald N. S, D

Effective date September 18, 2008

In accordance with Resolution No. 08-02 of Collision One, Inc.

<u>Title</u>	Name	Address	Type of Action
S, D	Donald N. Mann, Jr.	825 4 th Street Vero Beach, FL 32962	Add

Effective date March 29, 2007 In accordance with Resolution No. 07-01 of Collision One, Inc.

VP, D Shawn M. Thompson 1034 SW Bianca Ave. Remove Port St. Lucie, FL 34953

Effective date September 18, 2008 In accordance with Resolution No. 08-02 of Collision One, Inc.