

PO6000125157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

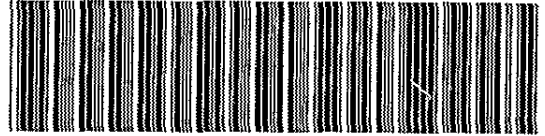
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*Amend*

*[Signature]*

**FILED**  
06 OCT 19 AM 9:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** MOTORFIX SERVICES INC

**DOCUMENT NUMBER:** P06000125157

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RIGOBERTO TORRES

(Name of Contact Person)

MOTORFIX SERVICES INC

(Firm/ Company)

2191 SW 67TH AVE

(Address)

MIAMI, FL 33155

(City/ State and Zip Code)

For further information concerning this matter, please call:

MANUEL MUNOZ

(Name of Contact Person)

at ( 305 ) 300-6837

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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 Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

MOTORFIX SERVICES INC

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

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P06000125157

(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)**

ARTICLE V: RIGOBERTO TORRES, 2191 SW 67TH AVE, MIAMI, FL 33155

RESIGNS AS REGISTERED AGENT. ALAIN RODRIGUEZ, 2191 SW 67TH AVE,  
MIAMI, FL 33155 IS NAMED NEW REGISTERED AGENT.

ARTICLE VI: RIGOBERTO TORRES, 2191 SW 67TH AVE, MIAMI, FL 33155 RESIGNS  
AS PRESIDENT. ALAIN RODRIGUEZ, 2191 SW 67TH AVE, MIAMI, FL 33155  
IS NAMED PRESIDENT.

(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)

(continued)

The date of each amendment(s) adoption: OCTOBER 12, 2006

Effective date if applicable: \_\_\_\_\_  
(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.

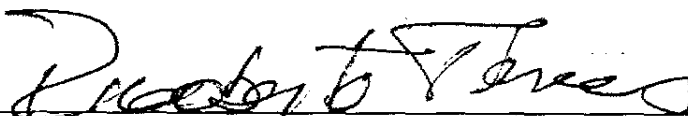
☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"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.

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)

RIGOBERTO TORRES

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**FILING FEE: \$35**

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

MOTORFIX SERVICES INC

2. The name and address of the registered agent and office is:

2191 SW 67<sup>TH</sup> AVE  
MIAMI, FL 33155

SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

*[Handwritten Signature]*

PRESIDENT

10-12-06

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TALLAHASSEE, FLORIDA

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. OR IF THIS DOCUMENT IS BEING FILED MERELY TO REFLECT A CHANGE IN THE REGISTERED OFFICE ADDRESS, I HEREBY CONFIRM THAT THE CORPORATION HAS BEEN NOTIFIED IN WRITING OF THIS CHANGE.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

*[Handwritten Signature]*

10-12-06