P06000147621

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section

Division of Corpo	orations				
NAME OF CORPOR	AATION: LOS	Granle Lat	no Tires, Inc		
DOCUMENT NUMB	ER:	00147621			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
-	Michae	/ Bock Name of Contact Person			
		Name of Contact Person	n		
-		Firm/ Company			
-	1233 SPO	tswood ct.			
-	Trinity	PL. 3	4655		
	•	City/ State and Zip Code	e		
	E-mail address: (to be us	mT @ 6 ma., sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Michael	Bock	at (727	de & Daytime Telephone Number		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	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)		
	ing Address		Address		
	idment Section ion of Corporations	Amendment Section Division of Corporations			
	Box 6327		Building		
Tallal	hassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

(<u>Name of C</u>	<u>Jorporation as curi</u>	ently filed with the F	<u>iorida Dep</u>	<u>t. oj State</u>)	l	
	(Document Numb	er of Corporation (if k	nown)			
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes,	this <i>Florida Profit Co</i>	rporation a	dopts the fo	ollowing amendn	ient(s) to
A. If amending name, enter the new name	e of the corporation	<u>:</u>			m.i	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional association	on "Corp," "Inc,"	or "Co". A professio	or "incorpo	orated" or ation name	The ne the abbreviation the must contain the	n
B. Enter new principal office address, if a (Principal office address MUST BE A STR		1295 NPR	S HI	ALEA 346	# NU 6-	FILE
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF					100 100 100 100 100	PH 1: 36
D. If amending the registered agent and/o new registered agent and/or the new r	egistered office add	lress:	-;-	me of the		
Name of New Registered Agent		Brunton	JR.			
_		HIALEAH Ja street address)	Ave	, Florida	34654	
New Registered Office Address:	Jew po	(City)		_, Florida	(Zip Code)	
New Registered Agent's Signature, if chall I hereby accept the appointment as registered.	nging Registered A	gent: liar with and accept th		is of the po	sition.	

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.

<u>X</u> Change	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P Thomas Bonton Jr.	12955 Hialeah Ave Now Pat N. Cher FL 54654
<u>X</u> Add		Nowport nicker fl. 54654
Remove		
2) Change	P Michael Bock	1233 Spots wood ct Trinity Pl. 34655
Add		Trinity Pl. 34655
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

	ional sheets, if necessary).	(Be specific)	nge(s) here:			
						
			_			

		 -				
			_ 			
						
<u> </u>						<u> </u>
						_
						
<u>provisions f</u>	ment provides for an exclor for implementing the amoupplicable, indicate N/A)	hange, reclassif endment if not c	ication, or cance contained in the	llation of issued amendment itsel	<u>shares.</u> f:	
				<u> </u>		
						_
						_

The date of each amendment(s) adoption date this document was signed.			2017	, if other than th
Effective date if applicable:	(no more than 90 day	201	7 . endment file date)	
Note: If the date inserted in this block do document's effective date on the Department		statutory fi	iling requirements,	this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of approval.	ber of vote	s cast for the amend	lment(s)
☐ The amendment(s) was/were approved be must be separately provided for each verified.				
"The number of votes cast for the	amendment(s) was/were suff	ficient for a	pproval	
by	(voting group)			
	(voting group)			
☐ The amendment(s) was/were adopted by action was not required.	the board of directors witho	out shareho	lder action and shar	eholder
The amendment(s) was/were adopted by action was not required.	the incorporators without sl	nareholder	action and sharehol	der
Dated Fee	hury 15, 20	2/7		
Signature	n. 12	, 		
(By a director, selected, by an	president or other officer – i incorporator – if in the hand ciary by that fiduciary)			
	Michael (Typed or printed name	/ /.	BOCK	
	(Typed or printed name	of person s	igning)	
	Plusi-Le	est	_	
	(Title of per	son signing	g)	

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