Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fa:: Number

: (850)617-6380

From:

Account Name : VICTOR LERRO & COMPANY, P.A.

Account Number : 120040000118 Phone : (561)995-0064 Fam Number : (561)995-7551 ECRETARY OF STATE

COR AMND/RESTATE/CORRECT OR O/D RESIGN

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SECRETARY OF STATE

ALL AHASSEE: FLORIDA

CHARLY'S TOW TRUCKS, INC.

| Certificate of Status | 0 |
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Corporate Filing Menu

Help of Algorian

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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: CHARLY'S | TOW TRUCKS, INC. | | |
|--|---|---|--|
| DOCUMENT NUMBER: P07000103208 | | | |
| The enclosed Articles of Amendment and fee ar | e submitted for filing. | | |
| Please return all correspondence concerning this | s matter to the following: | | |
| ···· | Victor Lerro | | |
| (Name o | f Contact Person) | | |
| | Victor Lerro & Company, P.A. | | |
| (Fir | m/ Company) | | |
| | 2nd Avenue, Ste 201 | | |
| | (Address) | | |
| · · | Raton, FL 33432 ate and Zip Code) | | |
| For further information concerning this matter, p | • . | | |
| Victor Lerro (Name of Contact Person) | at (<u>561</u>) <u>995-0064</u> (Area Code & Daytime | 7.1.1 | |
| Enclosed is a check for the following amount m | | - | |
| \$35 Filing Fee \$\sum \text{Status}\$43.75 Filing Fee &\text{Certificate of Status}\$ | S43.75 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 Ci Tallahassee, FL 32301 | rcle | |

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Articles of Amendment to Articles of Incorporation of

| CHARLY'S | TOW TRUC | KS, INC. | | | | | |
|--|--|--------------------------------|------------------|-------------|--|--|--|
| (Name of Corporation as curre | ently filed with the | he Florida Dept. of St | ate) | | | | |
| P07000103208 | | 1 | | | | | |
| (Document Num | (Document Number of Corporation (if known) | | | | | | |
| Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Incorp | | es, this <i>Florida Profit</i> | Corporation a | dopts the | | | |
| A. If amending name, enter the new name of | f the corporation | <u>ı:</u> | SEC | 09 / | | | |
| The new name must be distinguishable a "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A." | "Inc.," or Co., | " or the designation | "Corp," Tinc," | FILED | | | |
| B. Enter new principal office address, if app (Principal office address MUST BE A STREE | | | - <u>19</u> | <u>유</u> | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or revergistered agent and/or the new registered. | CE BOX) | | ter the name of | | | | |
| | | | | | | | |
| Name of New Registered Agent: | | | _ | | | | |
| New Registered Office Address: | (Florid | da street address) | - - | | | | |
| | | | Florida | | | | |
| | | (City) | (Zip Code, | , | | | |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered position. | ng Registered Ap lagent. I am f | gent: amiliar with and acce | pt the obligatio | ns of the | | | |
| | ignature of New 1 | Registered Agent, if cha | anoino | | | | |
| | | | mrofffb | | | | |

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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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|---------------|--------------------------------------|---|------------------------------|
| <u>VP</u> | Frank Frasca | 412 NE 3rd Street Boynton Beach, FL 33436 | |
| | | HOYMON BEAUT, FL 33430 | C Remove |
| | | | |
| | , | | |
| | | | |
| | | | _ |
| E. If am en | nding or adding additional Articles | , enter change(s) h <u>ere</u> : | |
| | additional sheets, if necessary). (B | | |
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| | | 45 | |
| | | | |
| | | | |
| provis | ions for implementing the amendm | ge, reclassification, or cancellation of tent if not contained in the amendmen | issued shares, it itself: |
| (if | not applicable, indicate N/A) | | |
| | 400 | A LAG ASSETTION | n. |
| | | | |
| MIN CO. T. II | | | |
| | | | |
| | | | |
| | | | |

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The date of each amendment(s) adoption: April 14, 2009 Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted 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 (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. Dated_April 15, 2009 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) Victor Lerro (Typed or printed name of person signing)

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Attorney-in-Fact for Concetta Gullotta, President

(Title of person signing)