

P07000106519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

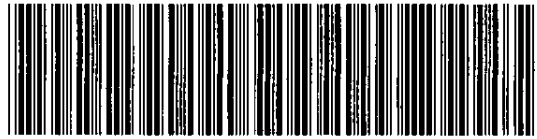
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800152672168

04/27/09--01044--007 \*\*35.00

*Ames*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 MAY 11 PM 3:04

FILED

T. Roberts MAY 11 2009



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 1, 2009

GARY JUIDICIANI  
FLEET LEASING AND SALES INC.  
4855 ROTHSCHILD DRIVE  
CORAL SPRINGS, FL 33067

SUBJECT: FLEET LEASING AND SALES INC.  
Ref. Number: P07000106519

We have received your document for FLEET LEASING AND SALES INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 909A00014724

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 MAY 11 AM 8:00

RECEIVED

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: FLEET LEASING AND SALES INC.

DOCUMENT NUMBER: P07000106519

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

Please return all correspondence concerning this matter to the following:

Gary Juidiciani

Name of Contact Person

FLEET LEASING AND SALES INC.

Firm/ Company

4855 Rothschild Drive

Address

Coral Springs Fl. 33067

City/ State and Zip Code

Secondmil2@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Juidiciani

Name of Contact Person

at ( 954 ) 345-0707

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

*you have my check  
already. 954-345-0707*

**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

FILED  
09 MAY 11 PM 3:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PO 7000106519

*Gary J. J. J. J.*  
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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>ARNOLD, BLAIR</u>	<u>4855 Rothschild Drive</u> <u>Coral Springs Fl. 33067</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>JUDICIANI GARY</u>	<u>4855 Rothschild Drive</u> <u>Coral Springs Fl. 33067</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P</u>	<u>JUDICIANI GARY.</u>	<u>4855 Rothschild Drive</u> <u>Coral Springs Fl. 33067</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
 (attach additional sheets, if necessary). (Be specific)

---

---

---

---

---

---

---

---

**F. If an amendment provides for an 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)

---

---

---

---

---

---

---

---

The date of each amendment(s) adoption: 4/06/2009

Effective date if applicable: 4/06/2009  
(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

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.

Dated 05/06/2009

Signature Gary Joidician  
(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)

Gary Joidician  
(Typed or printed name of person signing)

President  
(Title of person signing)