## P08000016143

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R. Washing

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Loopster's Towin	g and Collision, Inc.				
DOCUMENT NUM	P08000016143					
The enclosed Article	s of Amendment and fee are su	abmitted for filing.				
Please return all corr	espondence concerning this ma	atter to the following:				
	Jameen Shahid					
	******	Name of Contact Perso	n			
	Loopstrer's Towing and Collision, Inc.					
		Firm/ Company	<del> </del>			
	36735 Rolling Acres Rd	Time Company				
	- "."	Address	····			
	Fruitland Park, FL 34731					
		City/ State and Zip Cod	e			
loon	esterstowing@yahoo.com					
		sed for future annual report	notification)			
	Danan address. (10 00 to	sea for father annual report	normation)			
For further informati	on concerning this matter, pleas	se call:				
Jameen Shahid		at (352	315-1087  de & Daytime Telephone Number			
Namo	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check t	or 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)	Certificate of Status Certified Copy (Additional Copy is enclosed)			
<u>M:</u>	ailing Address	Street	Address			
An	nendment Section	Amendment Section				
	vision of Corporations	Division of Corporations				
	D. Box 6327 Habassaa, El. 32314		Building			
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED
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Loopster's Towing and Collision, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P08000016143 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 14480 E. Hwy 40 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Silver Springs, FL 34488 C. Enter new mailing address, if applicable: 14480 E. Hwy 40 (Mailing address MAY BE A POST OFFICE BOX) Silver Springs, FL 34488 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

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.

X Change	<u>PT</u>	John Do	<u>κ</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
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	ding additional Article sheets, if necessary). (	(Be specific)			
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The date of each amendment(s) a	rebruay 4, 2019	, if other than the
date this document was signed.	uopiion:	, it other dan the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment afficient for approval.	(s)
	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	opted by the board of directors without shareholder action and sharehold	ler
February Dated Signature	Ancen Shahid  lirector, president or other officer – if directors or officers have not been	
selecte	<ul> <li>d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary)</li> </ul>	
	Jameen Shahid	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	