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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: FAST WHEELS INC. DOCUMENT NUMBER: P08000023794 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JUAN CARLOS MAZZA Name of Contact Person FAST WHEELS INC. Firm/ Company 10660 NW 123 ST RD BAY 107 MEDLEY, FL. 33178 Address MEDLEY, FL. 33178 City/ State and Zip Code LENIEVOORDOUW34@MSN.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 470-9090 JUAN CARLOS MAZZA Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: 💆 \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) 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 Articles of Incorporation

FAST WHEELS INC.

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

P08000023794		5
(Docur	ment Number of Corporation (if know	n)
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corpor	ation adopts the following amendmen
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co". A professional	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
(Principal office address SIOST BE A STREET ADD	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	3V)	
maning dates MATT DE AT OUT OF THE DO	<u></u>	
D. If amending the registered agent and/or registe	ered office address in Florida, enter	the name of the
new registered agent and/or the new registered		
Name of New Registered Agent		
	(Florida street address)	
None Benjaran J. Office Address		. Florida
New Registered Office Address:	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent:	digations of the position
т петепу иссері те арроттені из гедімегей идет.	Tan januar wan and accept the on	ngunons by 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.

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	V	LUCIANO ARTURO MAZZA	13178 SW 45 DR	
X Add			MIRAMAR, FL. 33027	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Remove				
5) Change				
Add				
Remove				
Characa				
6) Change Add				
Add Remove				
Kemove				

RTICLE VII			
RTICLE VII			
		SHA	RES
UAN CARLOS MAZZA	13178 SW 45 DR	50	8
	MIRAMAR, FL. 33027		
JUCIANO ARTURO MAZZA	13178 SW 45 DR	50	8
	MIRAMAR, FL. 33027		
rovisions for implementing the amen	inge, reclassification, or cancellation of i dment if not contained in the amendmen		
(if not applicable, indicate N/A)			

•		
The date of each amendmen date this document was signed	(5) adoption: <u>SEPTEMBER</u> .25., 2018	, if other than the
Effective date if applicable:	_SEPTEMBER_252018	
	SEPTEMBER 25. 20.18 (no more than 90 days after amen	dment file date)
Note: If the date inserted in	this block does not meet the applicable statutory fili ne Department of State's records.	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes or sufficient for approval.	east for the amendment(s)
☐ The amendment(s) was/wer must be separately provide	e approved by the shareholders through voting groups d for each voting group entitled to vote separately on	s. The following statement the amendment(s);
"The number of votes	cast for the amendment(s) was/were sufficient for app	proval
by	(voting group)	
	(voting group)	·
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder uc	tion and shareholder
Dated_SEP	TEMBER 25, 2018	
Signature /	war m	
(B)	of a director, president or other officer—if directors or ected, by an incorporator—if in the hands of a receive pointed fiduciary by that fiduciary)	
	LUCIANO ARTURO MAZZA	
	(Typed or printed name of person sign	ning)
	VICE PRESIDENT	
	(fitle of person signing)	