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SEGRETARY OF STATE

ANG 20 2013 T. LEMEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: American Traction	Systems, Inc.	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Cari Wilcox		
		Name of Contact Person	
	American Traction Systems		
		Firm/ Company	
	10030 Amberwood Rd	, .	
		Address	
	Fort Myers, FL 33913		
		City/ State and Zip Code	;
ewile	ox@americantraction.com		
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call: at (561-1561
Name o	of Contact Person	Area Coo	_/ le & Davtime Telephone Number
	r the following amount made p		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐543.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Issox 6327 Issaece, FL 32314	Amend Divisio Clifton 2661 E:	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

American Traction Systems, Inc.

(Name of Corporation as cur	rently filed with the Florida Dead of State 5
P08000065979	SECOLIAS V OF STATE
(Document Numl	SECRE IARY OF STATE ber of Corporation (if known) FALLAHASSEE, FEORIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, ts Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation	<u>n:</u>
name must be distinguishable and contain the word "corpo "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviat	The new ration, "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	10030 Amberwood Rd
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Fort Myers, FL 33913
). If amending the registered agent and/or registered office new registered agent and/or the new registered office ado	
Name of New Registered Agent	
	da street address,
New Registered Office Address:	, Florida
	Tap Code)
New Registered Agent's Signature, if changing Registered A. hereby accept the appointment as registered agent. I am fami	
Simotora A.C.V	12. Registered Agent if changing
Signature of N	24 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 Doc 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>	<u>Addres</u> s
1) Change	<u>V</u>	Juan Pinzon	10030 Amberwood Rd
Add X Remove			Fort Myers, FL 33913
2) Change	v	Mervin Quirk	10030 Amberwood Rd
X Add			Fort Myers, Fl. 33913
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	al sheets, if necessary)). (ве хресідіс)			
		14			
					
					
					
					
					
Cam a= 1	nt provides for an exc	change, reclassifi	cation, or cancellat	ion of issued share	<u>s.</u>
<u>r an amendme</u>	implementing the am	rendment if not co	ontained in the am	endment itself:	
provisions for	licable, indicate N/A)				
<u>provisions for </u>					
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The date of each amendment date this document was signed	t(s) adoption:	if other than the
_	- 08/13/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this che Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/web by the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendmen ere sufficient for approval.	t(s)
	re approved by the shareholders through voting groups. The following states ed for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes	s cast for the amendment(s) was were sufficient for approval	
by	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated Signature (B	By a director, president or other officer if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other component of fiduciary by that fiduciary)	
	Cari Wilcox	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	