P08000075510

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	DELRAY AUTO REPAIR INC			
DOCUMENT NUMBER:	P08000075510			
The enclosed <i>Articles of Amendm</i>	ent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
	DOMINIC ACIDO Name of Contact Person			
	DELRAY AUTO REPAIR INC			
	640 NE 6TH AVENUE			
E-mail add	DEURAU BEACH FL 33483 City/State and Zip Code DCOllision Dellsouth. Net ress: (to be used for future annual report notification)			
For further information concerning this matter, please call: 561 276 2555				
Name of Contact Person	at (Area Code & Daytime Telephone Number			
Enclosed is a check for the followi	ng amount made payable to the Florida Department of State:			
\$35 Filing Fee \$43.75 Filing Certificate of				
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 to Articles of Incorporation of

Dar	AY AUTO REI	PAIR INC
(Name of Corporation as curry		a Dept. or State)
Poau	10 10010	
(Document Nun	nber of Corporation (if kno	own)
suant to the provisions of section 607.100 endment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	Torida Profit Corporation adopts the following
If amending name, enter the new name of	f the corporation:	
		The new
previation "Corp.," "Inc.," or Co.," or the ne must contain the word "chartered," "pro Enter new principal office address, if app incipal office address <u>MUST BE A STREE</u>	ofessional association," or hicable:	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		
If amending the registered agent and/or r new registered agent and/or the new regis Name of New Registered Agent:		in Florida, enter the name of the
New Registered Office Address:	(Florida street d	address)
	·	الاستنام
	(City)	, Florida (Zip Code)

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>	Name	<u>Address</u>	Type of Action
Mar	Cavl Gartman	640 NEGMAVE	_ Add
		Delray Brack	Remove
			<u>_</u>
			_ 🗌 Add 🔲 Remove
			_
			_ 🔲 Add
			_ 🗌 Remove
			_
	ding or adding additional Articles, ent	er change(s) here:	
(attach a	ndditional sheets, if necessary). (Be spe	ecific)	
			
			
F Ifana	mendment provides for an exchange, r	reclassification or cancellation of is	ened charge
provisi	ons for implementing the amendment	if not contained in the amendment	itself:
(if r	not applicable, indicate NA)		
			· · · · · · · · · · · · · · · · · · ·
	,		
	· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s)	adoption:
Effective date if applicable:	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	ooting group)
(v	oting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated '	4 25 11
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Dominic Addico
	(Typed or printed name of person signing)
	President
-	(Title of person signing)