

DO9000015626

Florida Department of State
Division of Corporations
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
EXCELLENCE COLLISION CENTER INC**

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May 13, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EXCELLENCE COLLISION CENTER INC
312A SW 12 AVENUE
MIAMI, FL 331300S

SUBJECT: EXCELLENCE COLLISION CENTER INC
REF: P09000015626

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The name of the entity must be identical throughout the document.

PLEASE CORRECT THE ATTACHED REGISTERED AGENT FORM SHOWING THE CORPORATION NAME.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

FAX Aud. #: H11000129648
Letter Number: 811A00011923

RECEIVED
11 MAY 13 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF AMENDMENT

TO

ARTICLES OF INCORPORATION

OF

EXCELLENCE COLLISION CENTER INCP09000015626

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

ARTICLE 1 - NAME

EXCELLENCE COLLISION CENTER INC.

ARTICLE 2 - ADDRESS

1450 N.W. 21 ST., MIAMI, FL. 33142

ARTICLE 5 - REGISTERED AGENT/ADDRESS

MILEXIS GUTIERREZ-CAO

1450 N.W. 21 ST., MIAMI, FL. 33142

ARTICLE 7 - OFFICER

MILEXIS GUTIERREZ-CAO, P/T/S(D)

1450 N.W. 21 ST., MIAMI, FL. 33142

SECOND: 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, are as follows:

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TALLAHASSEE, FLORIDA

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FROM :

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THIRD: The date of each amendment's adoption: 05/10/11

FOURTH: Adoption of Amendment(s) (check one)

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups.

The following statement must be separately for each voting group entitled to vote separately on each 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.

Signed this 10th day of MAY, 2011.

Signature

(By the Chairman or Vice Chairman of the directors,
President, or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

MILEXIS GUTIERREZ-CAD
Typed or printed name

PRESIDENT
Title

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H11000129648

**CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: EXCELLENCE COLLISION CENTER INC

2. The name and address of the registered agent and office is:

MILEXIS GUTIERREZ-CAO
1450 NW 21 ST.
(P. O. BOX NOT ACCEPTABLE)
MIAMI, FL. 33142
(CITY/STATE/ZIP)

SIGNATURE X

(Corporate Officer)

TITLE PRESIDENTDATE 05/10/11

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE [Signature]

(Registered Agent)

DATE 05/10/11

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