P09000022490

(Requesto	r's Name)
(Address)	
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(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documen	t Number)
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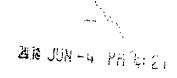
COVER LETTER

TO: Amendment Section Division of Corporations 福度 JUH -4 FM 4:21

NAME OF CORPO	DRATION: A.V.D. ALFONS	O AUTO REPAIR & TIRES	S. INC	•	. :
	1BER: P09000022490				
The enclosed Article	s of Amendment and fee are s	ubmitted for filing.			•
Please return all corr	espondence concerning this m	atter to the following:			
	ALFONSO SANCHEZ				
		Name of Contact Persor			
		Firm/ Company			
	331 S DIXIE HWY 4TH AV	ES			
		Address			
	LAKE WORTH, FL 33460				
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
prop	(Attions 2.2.2.2./Ct				
£1101E	totires3333@gmail.com	15.5.			
	c-mair address; (to be u	sed for future annual report	nottiication)		
For further informatic	on concerning this matter, plea	se call:			
ALFONSO SANCHI	5Z.	561 at (541-6857 ie & Daytime Telephone Nur		
Name	of Contact Person	Area Coo	le & Daytime Telephone Nur	nber	
inclosed is a check fo	or the following amount made				
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building			
Calls	abassee FL 32314	2661 Es	continue Contractition.		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



A.V.D. ALFONSO AUTO REPAIR & TIRES, INC.

(Name of Corporation	n as currently filed with the Florida Dept. of State)
P09000022490	~ · •
(Docume)	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corp	poration:
ALFONSO PRONTO TIRES & AUTO REPAIR, INC	The new
nome must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the al	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	
•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
•	
 If amending the registered agent and/or registered new registered agent and/or the new registered of 	
registered agent and of the new registered of	THE MAN 1331
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Regis	stered Agent: am familiar with and accept the obligations of the position.
no co, acceps me appointment as registered agent.	unifumition with white every the verifications of the position.
Signat	ture 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 = Trustec; C = Chairman or Clerk, CEO = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office hold. 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 D	<u>ne</u>	
\underline{X} Remove	\underline{V}	Mike Jo	ones .	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	Address
I) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				<u> </u>
Remove				
5) Change				
Add		_		
Remove				
6) Change		-		
Add				
Remove				

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f an amendment provides provisions for implement	for an exchange, recl	lassification, or ca	he amendment its	off.	
tit not on the prement	ing the amendment is	not contained in	HC BIRCHOILE II.	(
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The date of each amendment(s) adoption:	, if other than the
05/01/2019	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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.	
05/20/2019	
Dated	
Signature (1) LAMA-D Samber	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
ALFONSO SANCHEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	