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SEGGLIAGY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TQ: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations M JARO'S NAME OF CORPORATION: **DOCUMENT NUMBER:** P 09 0000 25 452 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SANDRA MOTTA 2835 POWELL ST MYERS F1 33 MARCOS AU TO REPAIR @ HOTMAL E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239) 332 - 0200 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □ \$52.50 Filing Fee \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

of
MARCO'S AUTO REPAIR INC. (Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent: GILAR MOTTA
New Registered Office Address: 9824 CRISTATINO VIEW WAY # 101 (Florida street address) FORT MYCRS Florida 33908
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

Page 1 of 3

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> Secretare	Name GILIAR	motta	Address 9824 CRISTALINO UIEW WAY # 101 FORT MYERS FI	Type of Action Add Remove
				Add Remove
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		nal Articles, enter cl		, , , , , , , , , , , , , , , , , , , ,
(attach addit	ional sheets, if neces	sary). (Be specific	·)	
provisions		he amendment if no	ssification, or cancellation on the contained in the amendme	

The date of each amendment(s) ac	doption: $(0-)$	9	`` .
Effective date if applicable:	more than 90 days after amena		
(no	more than 90 days after amena	dment file date)	
Adoption of Amendment(s)	(CHECK ONE)		•
The amendment(s) was/were add by the shareholders was/were su		e number of votes cast for the amend	iment(s)
		ough voting groups. The following wote separately on the amendment(s,	
	for the amendment(s) was/were	e sufficient for approval	
by(voti	ing group)	· · · · · · · · · · · · · · · · · · ·	
The amendment(s) was/were add action was not required.	opted by the board of directors	without shareholder action and shareholder	reholder
The amendment(s) was/were add action was not required.	opted by the incorporators with	hout shareholder action and shareho	lder
Dated 06	03/09		
Signature X	Jano A. Matt.)	
		er – if directors or officers have not be hands of a receiver, trustee, or other	
	d fiduciary by that fiduciary)	nands of a receiver, trustee, or other	Court
	(Typed or printed nam	ne of person signing)	
	Possidente		
	PRESIDENTE (Title of person signing)	•	