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Amendiz

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	4	TO BROTHERS	CINC		
NAME OF CORPORA	D0000005227		- INC		
DOCUMENT NUMBE	ER: 1 000000000		<u></u>		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
ſ	MARIA J PEREZ				
-	OPEZ AUTO BF	Name of Contact Person	1		
- -	OI LZ AOIO BI	Firm/ Company			
	2552 US HIGWA	• •			
_	, , , , , , , , , , , , , , , , , , ,	Address			
ŀ	HAINES CITY FL	. 33844			
_		City/ State and Zip Cod	e		
epa	orof@msn.com				
		sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
MARIA J. PEI			701-7748		
	Contact Person	at (407) 701-7748  Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	·	·		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy (is enclosed)		
Amer Divis P.O. I	ng Address Indicate the state of the state o	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

## **Articles of Amendment** to

**Articles of Incorporation** of

OIVISION OF CORPORATIONS 12 NOV 25 FH 1: 49

## LOPEZ AUTO BROTHERS INC

(Name of Corporation as currently filed with the Florida Dept. of State)

PC	9	0	0	0	0	5	3	3	7	6	
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. (Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
N/A	TI.
name must be distinguishable and contain the word "corporati" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P O BOX 554
(Mailing address MAT BE A POST OFFICE BOX)	DAVENPORT FL 33836
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
New Registered Office Address: KLSSI MM	rect address)  CC , Florida  (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	
Signature of New Registerea	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 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.

Example: $\underline{X}$ Change	PT	John D	<u>oc</u>		
X Remove	<u>V</u>	Mike J	ones		
X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	Title	•	Name		Address
1) X Change	P/D		marat. Per	2	2957 CANTER LANE
Add		_			KISSIMMEE FL 34746
Remove					
2) Change	-	_		_	
Add					
Remove					- <del></del>
3) Change		_		<del></del>	Walled Company of the
Add					
Remove				,	
4) Change					
Add					
Remove					
5) Change		_		<del></del>	-
Add			·		<del></del>
Remove					
6) Change		_		<del></del>	
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
TO CHANGE THE ADDRESS OF THE REGISTERED AGENT
AND P/D OF CORPORATION AS FOLLOW:
2957 CANTER LANE KISSIMMEE FL 34746
F. 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:  (if not applicable, indicate N/A)
N/A

the date of each amendment(s) adoption: NOV. 19, 2012	
effective date if applicable: NOV 19, 2012	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(	
"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 sha action was not required.	reholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Dated NOV 19, 2012	
Signature Signature Ose Very Adirector, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other	ot been her court
appointed fiduciary by that fiduciary)	
MARIA J PEREZ	
(Typed or printed name of person signing)	
P/D	
(Title of person signing)	