Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000175688 3)))



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To:

Division of Corporations

Fax Number

1 (850)617-6380

From:

Account Name

: PADRON AND ASSOCIATES INC.

Account Number : I20060000156 Phone

: (305)818-0404

Fax Number

: (305)818-0898

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN

ROLY AUTO BODY SHOP, INC.

Certificate of Status	O
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

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COYERLETTER

INC.

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	ROLY AUTO BODY SHOP,
DOCUMENT NUMBER: PO	

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharana and an	
RALPH PADRON	
Name of Contact Person	
PADRON & ASSOCIATES, INC.	
Firm/ Company	· · · · · · · · · · · · · · · · · · ·
2095 W 76TH STREET - SUITE 102	
Address	
HIALEAH, FL 33016	

City/ State and Zip Code
RALPH@RALPHPADRON.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RALPH PADRON			_{at (} 305	, 818-0404
Name of Contact Person			Area Co	de & Daytime Telephone Number
En	closed is a check for	the following amount made	payable to the Florida Depa	artment of State:
	\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy)

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

is enclosed)

H120001750003

Articles of Amendment to Articles of Incorporation of

ROLY AUTO	D BODY SHOP, INC.
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
PO	9000059305
(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:	06. Florida Statutes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name	of the corporation:
	The new
abbreviation "Corp.," "Inc.," or Co.," or ti	the word "corporation," "company," or "incorporated" or the he designation "Corp," "Inc," or "Co". A professional corporation rofessional association," or the abbreviation "P.A."
B. Enter new principal office address, if an	pplicable;
(Principal office address MUST BE A STRE	BI ADDRESS)
·	
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)	<u>FICE BOX)</u>
D. If amending the registered agent and/o new registered agent and/or the new re-	r registered office address in Florida, enter the name of the estatered office address:
Name of New Registered Agent:	SILVIO VASALLO
	2320 E 11TH AVE
New Registered Office Address:	(Florida street address)
	HIALEAH , Florida 33013
	(City) (Zip Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registere	ngine Registered Agent; ad agent. I am familiar with and accept the obligations of the position.
	- Mari
-	Signature pinlew Registered Agent, if changing

Page 1 of 4

H120001/50003

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: X Change	PT .	John Doe	
X Remove	Y :	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	PSTD	emiliano, andys m	2320 E 11TH AVE HIALEAH, FL 33013
2) Change Add Remove	PSTD	VASALLŌ, SILVIO	2320 E 11TH AVE HIALEAH, FL 33013
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	***************************************		

	heets, if necessary).	(Be specific)	e(s) here:		
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provisions for im	olementing the am	hange, reclassific endment if not co	ation, or cancelle gtained in the ar	ation of issued shar nendment itself:	

H1200012-1:15PM

The date of each amendment(s) ac	doption: 06/21/2012
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
action was not required. The amendment(s) was/were add action was not regulared.	opted by the incorporators without shareholder action and shareholder
Dated Signature	
(By a c	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
appoir .	nted fiduciary by that fiduciary) ANDYS M. EMILIANO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)