P090000088602

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Amendeus (a 5/20/12

COVERLETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	LATION: ALEXIS GE	NERAL REPAIRS	CORPORATION	
	P090006886			
	of Amendment and fee are su			
Please return all corres	pondence concerning this ma	tter to the following:		
	MARTHA ESTRA	ADA		
•		Name of Contact Person		
ALEXIS GENERAL REPAIRS CORPORATION				
•		Firm/ Company		
	5883 E 4 AVE			
		Address		
	Hialeah, FL 3301	3		
•		City/ State and Zip Code	•	
vaz	quezalexis69@ya	ahoo.com		
		sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Martha Estra	da	_{at (} 786	, 2878443	
Name of Contact Person		Area Coo	le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	Cls43.75 Filing Fee & Certified Copy (Additional copy is chelosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amendi Division Clifton 2661 E:	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301	



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2012

MARTHA ESTRADA ALEXIS GENERAL REPAIRS CORP. 5883 E 4 AVE HIALEAH, FL 33013

SUBJECT: ALEXIS GENERAL REPAIRS CORP.

Ref. Number: P09000068862

We have received your document for ALEXIS GENERAL REPAIRS CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 512A00014701

Articles of Amendment to Articles of Incorporation of

Alexis General Repairs	Corp.		•				
(Name of Corporation a	currently fik	d with the Flo	rida Dept. of St	ite)			
P09000068862							
(Docume	nt Number of C	'orporation (if)	(nown)				
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida	Statutes, this Fi	orlda Profit Cor	poration adopts	the following	; amendme	nt(s) to
A. If amending name, enter the new n	ame of the cor	poration:					
name must be distinguishable and con "Corp.," "Inc" or Co.," or the design word "chartered," "professional associa	ation "Corp,"	"Inc," or "Co	o". A profession	r "incorporate nal corporation	d" or the ab	The new breviation ontain the	
B. <u>Enter new principal office address.</u> (Principal office address <u>MUST BE A S</u>		<u>(ESS</u>)					
C. <u>Enter new mailing address, if appli</u> (Mailing address <u>MAY BE A POST</u>	icable: OFFICE BOX)				12 HAY 22 PH	SECRETARY OF SORPO
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	d/or registered of Martha E	<u>Nce address:</u>	s in Florida, em	er the name of	the	<u>ဒ</u> . 50	SPATE RATIONS
Tests of their Hospitcher View	5883 E 4	4 Ave	············				
		(Florida street	address)				
New Registered Office Address:	<u>Hialeah</u>			_, Florida 330)13		
		(City)		(2	Zip Code)		
New Registered Agent's Signature, if cl I hereby accept the appointment as regist Signature.	ered agent. ! i	am familiar wil	h and accept the	obligations of ti	he position,		

	(Be specific)
	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
<u> </u>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

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 Aid.

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>\$Y</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1) Change Add Remove	CEO	MARTHA ESTRADA	5883 E 4TH AVE HIALEAH, FL 33013	
2) Change Add Remove	р	ALEXIS VA. QUEZ	5883 E 4TH AVE HIALEAH, FL 33013	
3) Change Add Remove				
4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove		·		

The date of each amendment(s) adoption	= 5 - 22 - 2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amondment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the amendment(s) at for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	c amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were adopted to action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted in action was not required.	by the incorporators without shareholder action and shareholder
Dated 5-22-2012	<u> </u>
Signaturo	The factor of the officer – if directors or officers have not been
sciected, by a	in incorporator — if in the hands of a receiver, trustee, or other court luciary by that fiduciary)
MA	RTHA ESTRADA
	(Typed or printed name of person signing)
CE	0
	(Title of person signing)