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Certified Copies	_ Certificates	s of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Byster and Roo, Inc.  DOCUMENT NUMBER: P09000071886
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Lombardi  Premier Towing and Transport  Firm/ Company  Circle # 11  Palm Bay FL 32905  City/ Stateland Zip Code  Premier. Towing a hotmail. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David Lombardi at 321, 288-4792 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## **Articles of Amendment**

to

Articles of Incorporation

Buster	$\mathcal{A}$ $\mathcal{D}_{\alpha\alpha}$ $\mathcal{T}_{\alpha\alpha}$
(Name of Corporation as currently f	filed with the Florida Dept of State)
P0900	00071886
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatitis</i> Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	ompaly," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	——————————————————————————————————————
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	WA BOTT
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	
Name of New Registered Agent	-N/H
New Registered Office Address: (Florida street	. Florida
(C	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	ith and accept the obligations of the position.
Signature of New Reg	gistered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	V Mike	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Teresa L. Bailey	1772 Wind brook Drive Palm Bay, FL 32909
Add Remove			
2) Change Add	$\perp$	Craig S. Bailey	Palm Bay, FL 32909
Remove Change Add	<u>P</u> _	David Lombardi	5180 Dalehurst Drive Cocoa, FZ 32926
Remove 4) Change Add	D	David Lombardi	5180 Dalehurst Drive Cocoa, FL 32926
Remove  5) Change Add	I	David Lombard	1 5180 Dalehurst Drive Cocoa, FL 329726
Remove 6) Change Add	<u>S</u>	David Lombardi	5180 Dalehurs+ Drive Cocoa, FL 32926
Remove			,

If amending or adding additi Attach additional sheets, if nee	cessary). (Be specific	:)	NA	
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If an amendment provides for provisions for implementing	or an exchange, reclas	sification, or cane	ellatjon of issued shar	es,
(if not applicable, indica	g the amendment if netering the N/A)	of contained in the	angendment itself:	
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	than the
fective date if applicable: March 3, 2020	
(ho more than 90 days after amendment file date)	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listeneously effective date on the Department of State's records.	ed as the
doption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholde action was not required.	r
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Dated March 3, 2020	
Signature Suisa & Dailey tresides	
(By a director, president or other officer of 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)	
Teresa L. Bailey  (Typed or printed name of person signing)	_
(Typed or printed name of person signing)	
tresident	_
(Title of person signing)	