

P10 00000 8007

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

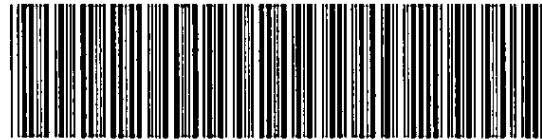
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900369809119

07/21/21--01020--010 **35.00

FILED

2021 JUL 21 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FL

AUG - 1, 2021

C Kinse

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Northgate Auto Repair Inc
DOCUMENT NUMBER: P10000008007

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

Please return all correspondence concerning this matter to the following:

Julissa Rosado
Name of Contact Person
DCM Services Center Inc
Firm/ Company
2529 W Busch Blvd Ste 1000
Address
Tampa FL 33618
City/ State and Zip Code
dcmseicescenter@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julissa Rosado at 813, 990 86 30
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
☐ \$43.75 Filing Fee & Certificate of Status
☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment
to
Articles of Incorporation
of

Northgate Auto Repair Inc

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

P10000008007

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new 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

DCM Services Center Inc

2529 W Busch Blvd Ste 1000

(Florida street address)

New Registered Office Address:

Tampa

(City)

Florida

33618

(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

Check if applicable

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

FILED
2021 JUL 21 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FL

Remove

(Attach additional sheets, if necessary). (Be specific)

Mariano Rivera Nieves hereby transfers 100% of shares of this company to Hector Rivera.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)"

Dated 07/18/2021

Signature Hector Rivera
(By a director, president or other officer – if 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)

Hector Rivera
(Typed or printed name of person signing)

President
(Title of person signing)