P100000076384

(Requestor's Name)
(Address)
,
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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000439777010

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SECRETARY OF STATE
TALLIAHASSEE, FL

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	Tim's	Auto + Truck	Inc. II		
DOCUMENT NUMBE	R: <u>P10000</u>	76384			
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:			
	Kristen	Hobbs			
_		Name of Contact Perso	n	,	
_	MB Accou	nting + Tax	Services Inc.	-	
	Po				
	· · · ·	Box 1229 Address			
	Thoma	tosassa Ri	33592		
<u></u>		City/ State and Zip Cod	le		
For further information	E-mail didress: (to be used)	bruck@gma: sed for future annual report	notification)	2024 NOV 19 AM 7: 20 SECRETARY OF STAT TALLAHASSEE, FL	
	-		000 11108	SEE SEE	11
<u>Kristen</u> Name of	Hobbs Contact Person	at (& LO Area Ce	ode & Daytime Telephone Numbe	7: 20 STAT FL	
Enclosed is a check for	the following amount made	payable to the Florida Dep	sartment of State:	mi	
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ng Address dment Section		Address Imment Section		
Divisi	on of Cornorations	Divisio	on of Corporations		

P.O. Box 6327

Tallahassee, Fl. 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

Jimis Auto + Truck Inc II

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

P10000026384 (Document Number of Corporation (if known)

	corporation:	
		The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abl	"corporation," "company," or "incorporated" or the a nc," or "Co" —A professional corporation name m breviation "P.A,"	abbreviation "Corp.," ust contain the word
3. Enter new principal office address, if applical Principal office address <u>MUST BE A STREET A.</u>		
7. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u>)	
		SE
		SECRET
N 16		AHA AHA
new registered agent and/or the new registered	stered office address in Florida, enter the name of the ed office address:	<u> </u>
Name of New Registered Agent		OF STAT
		FL TAT
	(Florida street address)	m
New Registered Office Address:	Florid	a(Zip Code)
	te nys	(zq) Cowy
New Registered Agent's Signature, if changing Reserved agent	Registered Agent: t. I am familiar with and accept the obligations of the	position.

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)

Example:

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.

X Change	PT	John Doe		
\underline{X} Remove	\underline{V}	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
1) Change	94	Laurie	Wischer	10006 10Pth Ave
Add				Thorotosassa, pe
X Remove				33592
2) Change				
Add				SECH N
Remove 3) Change				SECRETARY OF ST
Add				A 300 3 F
Remove				ASSEEL FL
4) Change		_		TATE
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

The date of each amendment(s) adoption:	, if other than the
fate this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after am	endment file date)
Note: If the date inserted in this block does not meet the applicable statutory to cument's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directo action was not required.	rs without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of vot by the shareholders was/were sufficient for approval.	es cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting gro- must be separately provided for each voting group entitled to vote separately	
"The number of votes east for the amendment(s) was/were sufficient for	approval
hy	
by	76 PA T
	SECRETARY OF STATE or officers have not been reiver, trustee, or other court
Dated October 25, 2024	2 5 1
1 41 9	787
Signature planted bllde	s or officers have not been reiver, trustee, or other court
(By a director, president or other officer − if directors	s or officers have not been $\nabla S = \frac{1}{2}$
selected, by an incorporator – if in the hands of a rec appointed fiduciary by that fiduciary)	eiver, trustee, or other court $PA 6$
appointed fiederary by that fiederary)	m
Anthony S Wisc	her
Anthony S Wisc (Typed or printed name of person	signing)
President	
(Title of person signing)	
4 i ide of lectoral affirme)	