# P10000019215

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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Baker Automotive Inc DOCUMENT NUMBER: P10000049215 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Brett Six** Name of Contact Person **Baker Automotive Inc** Firm/Company 16 Hollywood Blvd SE Address Fort Walton Beach, FL 32548 City/ State and Zip Code bakerautorepairfwb@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call-**Brett Six** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fcc □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fcc Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

# **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

### Articles of Amendment to Articles of Incorporation of

	of			
Baker Automotive Inc				-
P1000049215	s currently filed with the Florida	Dept. of State)		
	nt Number of Corporation (if know	<u></u>		-
Pursuant to the provisions of section 607. its Articles of Incorporation:	·	,	dopts the following	g amendment(s)
A. If amending name, enter the new na	ame of the corporation:			
				_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co".	ompany," or "incorpo A professional corpora	orated" or the all ation name must d	bbreviation contain the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				-
	<del></del>		<del></del>	-
C. Enter new mailing address, if appli	icable:	· · · · · · · · · · · · · · · · · · ·		•
(Mailing address MAY BE A POST	OFFICE BOX)			
	<del></del>			-
<ul> <li>If amending the registered agent an new registered agent and/or the nev</li> </ul>		Florida, enter the nan	ne of the	
Name of New Registered Agent	Brett Six			
	16 Hollywood Blvd	SE		
	(Florida street add	,	•	
New Registered Office Address:	Fort Walton Beach	, Florida	32548	
	(City)		(Zip Code)	<b>立</b>
				ECRETAR SION OF S
New Registered Agent's Signature, if c				<b>-</b> 5 号。
hereby accept the appointment as regist	<mark>e</mark> red agent. I am fap <del>uiltar</del> with an	d accept the obligation.	s of the position.	

Signature of New Registered Agent, if changing

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 <math>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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
_X Add	<u> </u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	Р		Kenneth Baker Sr.	1991 Shannon Rd
Add				Navarre, FL 32566
Remove				
2) Change	Р	_	Brett P. Six	PO Box 413
Add				Niceville, FL 32588
Remove				
3) Change				
Add				
Remove				
4) Change		<u></u>		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	<del></del>			
Remove				**************************************
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	. (Be specific)
<del>)</del>	
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If an amendment provides for an ave	change, reclassification, or cancellation of issued shares,
provisions for implementing the am (if not applicable, indicate N/A)	requirement in not contained in the amendment risers.
provisions for implementing the am (if not applicable, indicate N/A)	rendment it not contained in the amendment fixeri.
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provisions for implementing the am (if not applicable, indicate N/A)	rendment it not contained in the amendment fixer.
provisions for implementing the am (if not applicable, indicate N/A)	rendment it not contained in the amendment fixer.

The date of each amendment(s) date this document was signed.	) adoption:	_, if other than the
Effective date if applicable:		
Effective date it applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the sharcholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes e	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were action was not required	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated_10/10	/2013	
Signature	Full Sig	_
sele	a director, president or other officer – if directors or officers have not been octed, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	Brett Six	
	(Typed or printed name of person signing)	
	President	_
	(Title of person signing)	