## P1000054356

Office Use Only



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PIVISION OF CORPORATIONS

AUG 8 2016

C LEWIS

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: STEERing Repair Solutions, INC

DOCUMENT NUMBER: P10000054356

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

Please return all correspondence concerning this matter to the following:

YUNIA Ileana Marrero
Name of Contact Person
Steering Repair Solutions, INC
S Firm/ Company
1783 W 40 ST
Address
HiAleah, C1 33012
. City/ State and Zip Code
Para Steening & Jahoo. Om E-mail address: (to be ped for future annual report notification)
4

For further information concerning this matter, please call:

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:

S35 Filing Fee

Certificate of Status

Certified Copy
(Additional Copy is 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

(Name of Corporation as cur)	rently filed with the Florida Dept. of State)
P10000054356	
	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>ı:</u>
	The new
name must be distinguishable and contain the word "corpor" Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," word "chartered," "professional association," or the abbreviati	or "Co". A professional corporation name must compin the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	1785W 40" STZ # HIA Keah, FI 33042
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1779 w 40th ST HiAleah, F133012
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
Name of New Registered Agent YUN'S	I leana Marrero
1779 W	45 ST
New Registered Office Address: Hiale	10 street address)  (City)  (City)  (Lip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	
The con accept the appointment as registered again. I am junio	
Signature of N	ev 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 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 De	oc	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change				
Add				
Remove				
2) Change				
Add		_		
Remove				***************************************
3) Change				
Add	***************************************	<del></del>		
Remove				
4) Change		_		
Add				To the set of the set
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add				
Remove				

<b>f amending or adding ac</b> Attach <i>additional sheets, i</i>	if necessary). (Be spe	cific)		
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	A STATE OF THE STA			
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A STATE OF THE PARTY OF THE PAR	A die e bereitte Al-Desian werden und Al-Addition betätelichteten een ennemme. Var die	and display A display and a di	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
f an amendment provide	es for an exchange, re-	classification, or car	neellation of issued s	thares,
provisions for implemen	nting the amendment i	f not contained in th	<u>ie amendment itself</u>	<u>:</u>
(if not applicable, inc	dicate N/A)			

	he date of each amendment(s) adoption:	6/10/2016.	, if other than the
da	ite this document was signed.	, ,	SECONTAIN THE
Εí	ffective date if applicable:	6/10/2016	SECRETARY OF STATE
		(no more than 90 days after amendment file a	2016 JUL 29 AM 9: 0
	ote: If the date inserted in this block doe ocument's effective date on the Department	es not meet the applicable statutory filing requirent of State's records.	nents, this date will not be listed as the
A	doption of Amendment(s)	CHECK ONE)	
8	The amendment(s) was/were adopted by the shareholders was/were sufficient for	the shareholders. The number of votes east for the or approval.	amendment(s)
		the shareholders through voting groups. The folloting group entitled to vote separately on the amend	
	"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
	by	(voting group)	
	· ·	(voting group)	
	The amendment(s) was/were adopted by taction was not required.	the board of directors without shareholder action a	nd shareholder
	The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and sh	areholder
	Dated 7/25	2016	
	Signature		
		president of other officer – if directors or officers be incorporator – if in the hands of a receiver, trustee,	
		iary by that fiduciary)	or other court
		u . 11.	2000000
		(Typed or printed name of person signing)	- Maidoein
		Vice - Presider	±.
		(Title of person signing)	