Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

grom:

Account Name : EZ ACCOUNTING & TAX SERVICE, INC.

Account Number : 119980000019

: (954)785-3855

Phone Fax Number

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**Enter the email address for this business entity to be used for future annual deport mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN TEAM RACE SAFETY INC.

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Electronic Filing Menu

Corporate Filing Menu

SEP 1 3 7818

EXAMINER

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Articles of Amendment to Articles of Incorporation of

TEAM RACE	SAFETY IN	<u>c.</u>	
(Name of Corporation as cur	rently filed with the Floric	la Dept. of State)	
P100	00065658	·	
(Document No	imber of Corporation (if kno	own)	
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		Torida Profit Corporation ad	opts the following
A. If amouding name, enter the new name	of the corporation:		
First Response M.	erine Eafet	Z.c.	The new
nume must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pi	he designation "Corp," "In	c," or "Co". A professional	ted" or the corporation
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF E) D. If umending the registered agent and/or	<u>— — — — — — — — — — — — — — — — — — — </u>	in Florida, enter the name of	VISION OF CORPORATION 10 SEP 10 AM 11:33
new registered agent and/or the new re-			95
Name of New Registered Agent:		·	
New Registered Office Address:	(Florida street d	address)	
	(City)	, Florida (Zlp Code)	 .
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		and accept the obligations of ti	he position.
	Signature of New Registere	d Agent, if changing	

Page 1 of 3

Michael Keriew CPA EZ Accounting & Tax Service 2213 E. Atlantic Blvd Pompano Beach, Ft. 33062 FROM :EZ ACCTG

21.-

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)

<u>'Title</u>	Name	Address	Type of Action
VP_	Kelly Ruggles Gale	Jup; ter, Fc 33478	☐ Ādd ☐ Remove
Director	Kelly Ruggles Gole	1648 N. 108th Terr Jupiter, Fr 33478	Add Remove
<u> </u>	<u> </u>		
	ling or adding additional Articles, enter		
(allach ad	dditional sheets, if necessary). (Be speci	(fic)	
. <u></u>			
	. ,		
F. <u>Ifan an</u>	nendment provides for an exchange, rec	lassification, or cancellation of iss	ued shares,
	ons for implementing the amendment if of applicable, indicate N/A)	not contained in the amendment i	<u>lșelf:</u>
		<u> </u>	
			<u></u>
		. ,	
	, <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

(date of adoption is required)

(no more than 90 days after amendment file date) The date of each amendment(s) adoption: ____ Effective date if applicable: Adoption of Amendment(s) (CHECK ONE) 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 cast for the amendment(s) was/were sufficient for approval The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. e (By a director, president or other officer - if directors or officers have not been Signature selected, by an incorporator if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing) (Title of person signing)