P110000010124

(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:

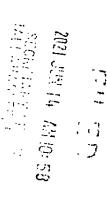
Office Use Only



100367660111

06/14/21=-01042=-024 **43.75

07/20/2021 JH



COVER LETTER

Division of Corporations tara's Yowersports & Small Engine Repair Inc. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ts + Small Engine Repair Inc. For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & **1 3 4 3 . 7 5 Filing Fee & .** □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

is enclosed)

Articles of Amendment

FUED

	to	
	Articles of Incorporation	2021 JUN 14 AM 10: 58
Santana's Powerspi	orts + Small Engl	re Repairs Inc
(Name of Corr	poration as currently filed with the Flo	rida Dept. of State)
<u> </u>	4	
(1	Document Number of Corporation (if kno	own)
Oursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	Florida Statutes, this Florida Profit Corpo	oration adopts the following amendment(s)
A. If amending name, enter the new name of	the corporation:	
name must be distinguishable and contain the wo "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A professional corpe	oration name must contain the word
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET		J. Hrmenia Ave , Florida 33604
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)	
D. If amending the registered agent and/or renew registered agent and/or the new registered Agent Name of New Registered Agent	egistered office address in Florida, ente tered office address:	er the name of the
	(Florida street address)	
	1. 15. 144 50. 11.	
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing the hereby accept the appointment as registered ag	g Registered Agent:	
	Signature of New Registered Agent, if ch	nanging

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)

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 X Remove X Add	PT John V Mike SV Sally		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) X Change Add	P	Eusebio Santana	2915 W. Saint John Stampa Fl 33607
Remove 2) Change Add	VP.	Milagros Santana	2915 W. Saint John St Tampa, Pr. 33607
Remove Change Add Remove	<u>√ρ</u>	Keyla Alvarez	2718 A Nest Walnut Tampa fi 33607
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		ticles, enter change(s) here: (Be specific)	

E Ifamèni	ing or adding addition	al Articles anter s	hange(c) here			
Attach <i>a</i>	lditional sheets, if neces	sary). (Be specific	ic)			
,	. ,	27 (= = <u>-</u> #13+ y)	,			
		•				
	-					
						
				<u> </u>		
•						
						
	· · · · · · · · · · · · · · · · · · ·					
				- 	 	
					 	
	-					
. If an aro	ndment provides for a	n exchange reclas	sification or can	rellation of issued	Irhanoc	
provisio	os for implementing th ot applicable, indicute N	e amendment if n	ot contained in th	ne amendment itse	elf:	
(if n	ot applicable, indicute N	V/A)				
						
						

The date of each amendment(s) adoption:	, if other than the
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 s document's effective date on the Department of State's records.	atutory 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 action was not required.	f directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numb by the shareholders was/were sufficient for approval.	er of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through versus the separately provided for each voting group entitled to vote see	
"The number of votes cast for the amendment(s) was/were suffi	cient for approval
by	, m
(voting group)	
Signature (By a director, president or other officer – if selected, by an incorporator – if in the hands	
appointed fiduciary by that fiduciary)	of a receiver, dustee, of other court
Eusebio S (Typed or printed name of	santana
Presider	•
	11
(Title of person signing)	