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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	CHUCKY'S MUF	FLER AND AUTO REPA	IR INC			
DOCUMENT NUMBER: P	11000029125					
The enclosed Articles of Amer	adment and fee are su	ibmitted for filing.				
Please return all correspondence	ce concerning this ma	tter to the following:				
сноки	и сненімі					
		Name of Contact Person	1			
CHUCK	CHUCKY'S MUFFLER AND AUTO REPAIR INC					
	Firm/ Company					
2201 E	BUSCH BLVD	· ······ company				
		Address				
TAMPA	A, FL 33612					
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·			
TAYACT006	YAHOO.COM					
		sed for future annual report	notification.			
D-1	nan address. (to be us	seu for future annual report	notification)			
For further information concern	ning this matter, pleas	se call:				
CHOKRI CHEHIMI		at (935-2707			
Name of Contac	et Person	at (Area Co) de & Daytime Telephone Number			
			•			
Enclosed is a check for the foll	owing amount made	payable to the Florida Depa	rtment of State:			
	43.75 Filing Fee & lertificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clitton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301			

Articles of Amendment to Articles of Incorporation

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CHUCKY'S MUFFLER AND AUTO REPAIR INC	•	15 341 日 温度51
(Name of Corporation	as currently filed with the Flo	orida Dept. of State)
P11000029125		TALLAHASSEE, FLORIDA
(Documer	t Number of Corporation (if kno	own) ====
Pursuant to the provisions of section 607 1006, Florida S ts Articles of Incorporation:	tatutes, this <i>Florida Profit Corp</i>	oration adopts the following amendment(s)
A. If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the ab	"Inc." or "Co". A profession	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR.	<u></u>	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	-	
	·	
). If amending the registered agent and/or registered	office address in Florida, ente	ou the name of the
new registered agent and/or the new registered of		er the name of the
Name of New Registered Agent		
-	(Florida street address)	
New Devices and Office Address		Elevia.
New Registered Office Address	(Citv)	, Florida (Zip Code)
	V = W/	/
New Registered Agent's Signature, if changing Regist	red Agent	
hereby accept the appointment as registered agent. I a		obligations 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 Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s		
1) Change	VP	OMAR MOST	AFA	10610 N 30TH ST		
Add			_	# 32H		
X Remove				TAMPA, FL 33612		
2) Change						
Add						
Remove						
3) Change						
Add						
Remove						
4) Change		_				
Add						
Remove					· <u>-</u>	
5) Change		-				
Add				***		
Remove				-		
6) Change						
Add						
Remove						

(Atta	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
f an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
	(y not appricable, maicale 1974)

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
06/09/2 Dated	2015	
Signature ()	M.: Chehim.	
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	_
	CHOKRI CHEHIMI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	