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A MUTTER [22]

COVER LETTER

TO: Amendment Section Division of Corporations	\				
NAME OF CORPORATION: Talleres 600 Body Shop, Corp					
DOCUMENT NUMBER: PITCO	430-8				
The enclosed Articles of Amendment and fee are sub	mitted for filing.				
Please return all correspondence concerning this matt	ter to the following:				
Lisbe	Hame of Contact Person				
Talleres 81	DO Body Shop Corp Firm Company				
561 000	29th Street				
<u> </u>	Address				
M.ami	433127				
	City/ State and Zip Code				
E-mail address: (to be use	ed for future annual report notification)				
For further information concerning this matter, please	e call:				
MarriethA Marles	at 305, 608-7082				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:				
S35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address	Street Address				
Amendment Section Division of Corporations	Amendment Section Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment Articles of Incorporation of

10	Pro-
	FILED
(Name of Corporation as currently	y filed with the Florida Dept. of State)
P1100006	023 110 1 14 Mill: 08
(Document Number of	f Corporation (if known) Signature Telephone Signature S
Pursuant to the provisions of section 607.1006, Florida Statutes, this a staticles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	- 2C
Name of New Registered Agent Lisbel Con	rces.
561 NW De	3 h Sheet
New Registered Office Address:	(City) , Florida 39177 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	1.
I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Lishet Gar	us
Signature of New R	egistered Agent, if changing

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.

X Change	PT John De	<u>oe</u>	
X Remove	V Mike Jo	<u>ones</u>	
X Add	SV Sally S	mith_	
Type of Action (Check One) 1) Change	Title	Lisbet Carces	Stor Nw29th Shed Highing Fe 33127
Add Remove 2) Change Add	2	Magdiel Garces	561 NW 294 Shed Whami & 33127
Remove Change Add	<u>PA</u>	Lisbet Corces	Manife 33127
Remove 4) Change Add	PA	Magdiel Caces	56/ NO 29th Shut M. ani Ge 33127
## Remove 5) Change Add			
Remove 6) Change Add			
Remove			

<u> </u>
<u> </u>

<u>s.</u>

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	~ 1.7	2023	
The date of each amendment(s) adoption: _ date this document was signed.		1	, 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 document's effective date on the Department		ory filing requirements, this date	will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)		
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of din	ectors without shareholder action	and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient to		votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by must be separately provided for each voting			
"The number of votes east for the an	endment(s) was/were sufficient	for approval	
by		•• 	
(v	oting group)		
Dated	18023		
Signature	d Horos		
	sident or other officer - if direc		
		receiver, trustee, or other court	
appointed fiducia	ry by that fiduciary)		
	Lisbet Coa.	rus	
	(Typed or printed name of per	son signing)	
		า	
	Tresidant	/	
	(Title of person signing)		