P12000039849

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COVER LETTER

TO:	Amendment Section
	Division of Corporations

NAME OF CORPORATION: ALPINO AL		N CENTER INC
DOCUMENT NUMBER: P1200003984	19	
The enclosed Articles of Amendment and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
DIANA SANTIAG	SO	,
•	Name of Contact Perso	n
ALPINO AUTO C	COLLISION CEN	ITER INC
	Firm/ Company	
7911 WOODGRO	OVE CIRCLE	
	Address	
TAMPA,FL 3361		
	City/ State and Zip Cod	e
LADYDEE187@GM/	AIL.COM	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, plea	se call;	
DIANA SANTIAGO	_{at (} 813	928-9573
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee \$\text{Certificate 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 Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Eassee, FL 32301

Articles of Amendment **Articles of Incorporation** of

12 JUH 25 PM 3:27

ALPINO AUTO COLLISION CENTER INC

(Name of Corporation as currently filed with the Florida Dept. of State)

DACOCCOOLOGO	riorida Dept. of State)
P12000039849	400
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s 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 "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	7911 WOODGROVE CIRCLE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	TAMPA,FL 33615
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 addres	
Name of New Registered Agent	
(Florida si	treet address)
New Registered Office Address:	, Florida
(City	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen	ıt:
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New Pagistared	Agant 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	<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>	Address
1) Change Add Remove	<u>v</u>	RAFAEL O SANTIAGO	7911 WOODGROVE CIR,TAMPA,FL 33615
2) Change Add Remove	v	IVAN SANTIAGO	7911 WOODGROVE CIR,TAMPA,FL 33615
3) Change	V	JOVANI SANTIAGO	7911 WOODGROVE CIR, TAMPA, FL 33615
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if	ditional Articles, e f necessary). (Be	specific)	·		
				•	
			,		
····	· · · · · · · · · · · · · · · · · · ·				
				_ _	
					
If an amendment provides provisions for implement (if not applicable, indi	ting the amendmen	reclassification, nt if not contain	or cancellation ed in the amendr	of issued shares, nent itself:	
					- · · -
		·			
					
					

The date of each amondment(s) a	ndoption: 06-16-2012	
Effective date <u>if applicable</u> : 06	6-01-2012	
	(no more than 90 da	rys after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adby the shareholders was/were s		mber of votes cast for the amendment(s)
	proved by the sharehoders through reach voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
	t for the amendment(s) was were su	• •
by	(voting group)	"
	(voting group)	
action was not required.		hout shareholderaction and shareholder shareholder action and shareholder
Dated 06-16-	-2012	
Signature (By a consequence)	JUNA CARTAGORIAN AND STREET -	if directors or officers have not been nds of a receiver, trustee, or other court
•	DIANA SANTIAGO	
	(Typed or printed name	e of person signing)
	PRESIDENT	
	(Title of person sign	ning)