

(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



600309281176

02/20/19--01025--008 \*\*35.00

R. WHITE
FEB 21 2018



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	A EZ MECHANIC	CAND TIRES INC		
DOCUMENT NUME	BER: P12000062890			
	of Amendment and fee are su	bmitted for tiling.		
Please return all corres	pondence concerning this ma	tter to the following:		
	ABDELOUAHAB BELAAF	RAJ		
		Name of Contact Persor	1	
	A EZ MECHANIC AND TI	RES INC		
	-	Firm/ Company		
	2899 S ORANGE BLOSSO	M TRL		
		Address	_	
	ORLANDO FL 32805			
		City/ State and Zip Cod	e	
t. t				
Sabir.	orlando@hotmail.com			
	n-man address: (to be di	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
ABDELOUAHAB BI	Elaaraj	at (	929-7044	
Name of Contact Person		at (at Co	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made			
	2	, .		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Mai</u>	ling Address	Street	Address	
	ndment Section	Amendment Section		
	sion of Corporations  Box 6327	Division of Corporations Clifton Building		
	ihassee, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation



18 FEB 20 PM 2: 49 of

	01	_CC TOTAL CONTRACTOR
A EZ MECHANIC AND TIRES INC	<b>.</b>	The war has been been
(Name of Corpor	ation as currently filed wit	h the Florida Dept. of State)
P12000062890		
(Doc	cument Number of Corporati	on (if known)
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida Pr</i>	cofit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	np," "Inc," or "Co". A p	Thenew pany," or "incorporated" or the abbreviation rofessional corporation name must contain the
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>		· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	
D. If amending the registered agent and/or registered agent and/or the new register	stered office address in Flo ed office address:	rida, enter the name of the
Name of New Registered Agent		·
	(Florida street address	
	(r tortaa street aaaress)	
New Registered Office Address:	(City)	, Florida

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 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)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	V	NAJIB ELAMIR	12451 APPOMATOX DR	
X Add			ORLAND FL 32837	
Remove				
2) Change				
Add				
Remove				
3) Change			·	
Add				
Remove				
4) Change		_	<del></del>	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
				<del></del>
<u> </u>				
				<del>-</del>
	<del></del>			
<del></del>				
f an amendment provides for an exch	ongo realweification	or consollation of	icerand charge	
provisions for implementing the ame	ndment if not containe	d in the amendme	nt itself:	
(if not applicable, indicate N/A)				
<u> </u>				
				<del></del>
				<del></del>

The date of each amendment(s) adopt	ion:	if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
	(no more man 20 days after amenament fue date)	
<b>Note:</b> If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will ment of State's records.	not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes east for t	he amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
02/12/2018 Dated		
Signature A		
(By a direct selected, by	or, president or other officer – if directors or officers have not been ran incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	_
AB	DELOUAHAB BELAARAJ	
	(Typed or printed name of person signing)	
PRI	ESIDENT	
	(Title of person signing)	