120000655

(Req	uestor's Name)	······································
	\	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	e)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
		•

Office Use Only



200238080982

08/03/12--01018--020 **35.00

Smud 8 N/X 2812 AUG -6 PH 3: 85

COVER LETTER

Division of Corporations
NAME OF CORPORATION: AGARD PATS, Inc. DOCUMENT NUMBER: P12000065675
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
And GARCIA Name of Contact Person Aquarius Parts, Inc Firm/ Company 7200 mw 163 ST Address Address Lialli, Af 330/6 City/ State and Zip Code Aquarius Parts C Vahio 104 E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ana Cancia at 305 824-1324 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

, '			
•	Articles of Amendment		
	to		
•	Articles of Incorporation		48/2 Allo
AQuari	s. Parks #	oC.	2812 AUG -6 PM
(Name of Corporation as curre	ntly filed with the Florida Dept. o	of State)	TARISTY "
1/2000065	675	•	3855
(Document Num	ber of Corporation (if known)		
tursuant to the provisions of section 607.1006, Its Articles of Incorporation:	Florida Statutes, this <i>Florida Profit</i>	t Corporation adopts the fo	ollowing amendment(s)
A. If amending name, enter the new name of	the corporation:		
			The new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation cord "chartered," "professional association," of	"Corp," "Inc," or "Co". A profe		
. Enter new principal office address, if appl	icable:		
Principal office address <u>MUST BE A STREE</u> T			
	•		
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC			
(maning and ess MATE DE ATTOM OTTE	<u></u>		
 If amending the registered agent and/or renew registered agent and/or the new registered. 		a, enter the name of the	
new registered agent and/or the new regis	tered office address;		
Name of New Registered Agent			
	(Florida street address)		
	,		
New Registered Office Address:	(City)	, Florida	
	(City)	(Lip Ci	uej
law Dagistared Agant's Signature if -bandin	a Dogistopod Aponts		
lew Registered Agent's Signature, if changin hereby accept the appointment as registered ag	g Registered Agent: gent. I am familiar with and accer	ot the obligations of the no.	sition.
,tt.	, — у или исоор	and positive pos	

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.

X Change	<u>PT</u> John I	<u>Doe</u>	
X Remove	V Mike	Jones	
_X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>S</u>	Felix Yesa Jn.	7700 nw 1635T Mialli, IFI 3306
Add Remove			MiaMi, jFl 33016
2) Change Add	5_	Ana Garcia	7700 nw 16351 Lliadi, Fl 33014
Remove 3) Change Add	T	Felit Mesa Jn.	7700 nw 1635T Highli, Fl 330/
Remove 4) Change			
Add			
5) Change Add			
Remove			
6) Change Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
•	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
	

· · · · ·	1/3/12
he date of each amendment(s) ac	doption:
ffective date <u>if applicable</u> :	·
	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
action was not required. The amendment(s) was/were ado	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	
Dated 7-3	1-12
Signature	In Have a irector, president or other officer – if directors or officers have not been
selected	d, by an incorporator - if in the hands of a receiver, trustee, or other court
appoint	ted fiduciary by that fiduciary)
	Ana GARCIA
	(Typed or printed name of person signing)
	President/ Secretary.
	(Title of person signing)