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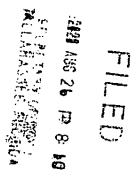
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ROADSIDE ASSIS	STANCE AND TOWING I	NC.
DOCUMENT NUMB	D100000000000		<u> </u>
	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
I	KENNETH E. LOWE		
-		Name of Contact Person	
-		Firm/ Company	
1	1464 PINE STREET		
-	-	Address	
ì	NICEVILLE / FLORIDA 32:	578	
_		City/ State and Zip Code	
(GNEO@COX.NET		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
KENNETH 6. LOWE		850 at (333-8536
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

ROADSIDE ASSISTANCE AND TOWING INC.

(Name o	of Corporation as current	ly filed with the Florida Dep	t. of State)	
P12000092659				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation a	dopts the follo	wing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation r	or the abbrevi name must con	iation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1464 PINE STREET		
		NICEVILLE, FL 32578		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1464 PINE STREET		
		NICEVILLE, FL 32578	700	5-3
		500 8	-	
D. If amending the registered agent ar			me of the	
new registered agent and/or the new		<u>s:</u>	400	چې دې
Name of New Registered Agent	KENNETH G. LOWE		75 T	
	1464 PINE STREET			Ø
	(Florida si	treet address)		
New Registered Office Address:	NICEVILLE		_, Florida	<u>'8</u>
	(City)		(i	Zip Code)
New Registered Agent's Signature, if cline I hereby accept the appointment as registered.	hanging Registered Agen tered agent. I am familiar	t: with and accept the obligation	ns of the positi	on.
	Signature of New	Registered 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	<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	PT	JORDAN DAVID SHARON	15 MAPLE AVE
Add			SHALIMAR FL 32579
X Remove			
2) Change	VS	CHELSEY RUTHMARIE SHARON	15 MAPLE AVE
Add			SHALIMAR FL 32579
X Remove 3) Change	PT	KENNETH GENE LOWE	1464 PINE STREET
X Add	•		NICEVILLE FL 32578
Remove			***************************************
4) Change	V	MATTHEW DON PATRICK LOWI	1129 47TH STREET
X Add			NICEVILLE FL 32578
Remove			
5) Change	S	CAYLA LOWE	1129 47TH STREET
X Add			NICEVILLE FL 32578
Remove			
6) Change			
Add			
Remove			

AUGUST 20, 2020
The date of each amendment(s) adoption:, if other than the date this document was signed.
AUGUST 20, 2020 Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)
(voling group)
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Title of person signing)