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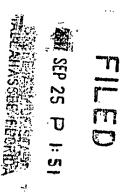
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



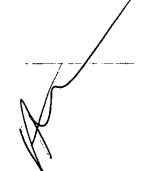


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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ACTION TOWING SERVICES INC		
DOCUMENT NUMBER: P1300000	03741		
The enclosed Articles of Amendment and f	ee are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
ANA HERNANDEZ			
	Name of Contact Person		
· S. LLANIO BUSINESS SERVICES INC			
	Firm/ Company		
1325 SE 47 ST UNI	ГН		
	Address		
CAPE CORAL, FL	33904		
	City/ State and Zip Code		
s.llaniobusiness@gmail.com			
E-mail address:	(to be used for future annual report notification)		
For further information concerning this mat			
ANA HERNANDEZ	at (²³⁹) 542-9104		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount	nt made payable to the Florida Department of State:		
S35 Filing Fee S43.75 Filing Certificate of	•		
Mailing Address 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 of

I & I ACTION TOWING SERVICES INC

(Name of Corporation as currently filed with the Florida Dept. of State) P13000003741 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: BORIS L. DIAZ CRUZ Name of New Registered Agent 213 WALLACE AVE N (Florida street address) LEHIGH ACRES New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 <math>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	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	IRAN VENTO	6540 EASTWOOD RD
Add X Remove			FT MYERS, FL 33905
2) X Change	P	BORIS L. DIAZ CRUZ	5007 BYGONS ST
Add			LEHIGH ACRES, FL 33971
Remove			
3) Change			
Add			***
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)		

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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation on and the amendment of not contained in the amendment.	f issued shares, ent itself:	
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation on the amendment if not contained in the amendment	f issued shares, lent itself:	

date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(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 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)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
09/19/17
Signature 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)
IRAN VENTO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)