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C. LEWIS OCT 2 9 2013 **EXAMINER**

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TK TIRES I	NC OF CASSA	T AVE			
DOCUMENT NUMBER: P13000030625					
The enclosed Articles of Amendment and fee are sul	bmitted for tiling.				
Please return all correspondence concerning this mat	ter to the following:				
REYNALDOGRIN	NSTEIN				
ARMOR INS AGY	Name of Contact Person	1			
ARMOR INS AG	Firm/ Company				
2631-A JAMMES					
	Address				
JACKSONVILLE	,FL 32210				
	City/ State and Zip Code	:			
ALOPOCHO@AOL.(COM				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
REYNALDO GRINSTEIN 904 779-2777					
Name of Contact Person Area Code & Daytime Telephone Nur					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	□\$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	Street Address				
Amendment Section Division of Corporations		ment Section			
P.O. Box 6327	· ·				
Tallahassee, FL 32314 2661 Executive Center Circle					
	Tallah	person El 20201			

APPROVED AND FILED

13 OCT 23 PM 1:27

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Articles of Amendment to Articles of Incorporation

TK TIRES INC OF CASSAT AVE

(Name of Corporation as currently filed with the Flor	rida Dept. of State)
P13000030625	
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006 , Florida Statutes, this Fh its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NJA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	,
· · · · · · · · · · · · · · · · · · ·	NA
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent Name of New Registered Agent	s
(Florida street	address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	to a foreign describe a final and of the second
I hereby accept the appointment as registered agent. I am familiar wit λ λ	n and accept the obligations of the position.
<i>i</i> 111	

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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	RASSAS ALI MOHAMMED	1964 CASSAT AVE ,JAX
Add			ALGHATHI	FL 32210
Remove				
2) Change	VP	_	ALI MUSLIN-MOHAMED ARDO	1964 CASSAT AVE,JAX
Add				FL 32210
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				

	if necessary). (Be	specific)			
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an amendment provider an amendment provider an amendment provisions for implementations for implementations and the control of	es for an exchange	ent if not conta	ined in the ame	on or issued Shar	<u>es,</u>
(if not applicable, it	ndicate 374)	em ii not conta	inca in the anic	nument usem	
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	ANDVEO
The date of each amendment(s) adoption: 10-18-2013	Tolker when the
date this document was signed.	Second 23 PM
Effective date if applicable: 10-18-2013	TALLAHARY OF 1:27
(no more than 90 days after amendment file date)	AND FILED FILED SECRETARY OF STATE AND FILED FILED
Adoption of Amendment(s) (CHECK ONE)	THOA
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(yoting 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.	
Dated 10-18-2013	
Signatura	
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)	
REYNALDO GRINSTEIN	
(Typed or printed name of person signing)	
INCORPORATOR	
(Title of person signing)	