P1300036194

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(Address)
(Addiess)
(Address)
(City/State/Zip/Phone #)
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(Document Number)
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14 APR 28 PM 2:38
SECRETARY OF STATE

C. LEVVIS

MAY 7 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Anything Auto Parts DOCUMENT NUMBER: P13000036194
DOCUMENT NUMBER: \$13000 0 36194
The enclosed Articles of Amendment and fee are submitted for iffing.
Please return all correspondence concerning this matter to the following:
John Permenter Name of Contact Person
Name of Contact Person
Anything Auto Parts First Company
Firm√ Company
11250 old ST. Augustine Rd 15153
Jackson ville, Florida 32257 City State and Zip Code
E-dail address: (to be used for change annual report notification)
For further information concerning this matter, please call:
John Permenter 904 249-2989
Tohn Permenter at (904) 349-2989 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 Certificate of Status Certificate of Status Certificate of Status (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

Street Address

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

is enclosed)

APPROVILLAND FILED

Articles of Amendment

to Articles of Incorporation 14 APR 28 PM 2: 38

Articles of Incorporation	
A A A A A	SECRETARY OF STAT TALLAHASSEE, FLORI
(Name of Corporation as currently filed with the Florida Dept. of State	<u> </u>
^	<u>e)</u>
f 13 0000 36 194	
(Document Number of Corporation (if known)	
arsuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corpo</i> Articles of Incorporation:	pration adopts the following amendment
. If amending name, enter the new name of the corporation:	
All things Auto Parts, Inc. ame must be distinguishable and contain the word "corporation," "company," or	The new
Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional ord "chartered," "professional association," or the abbreviation "P.A."	el corporation name must contain the
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX:	
	* 141-74F
	MA AV
. If amending the registered agent and/or registered office address in Florida, ente new registered agent and/or the new registered office address:	r the name of the
new registered agent and/or the new registered office address.	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	, Florida
(City)	(Zip Code)

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			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			1/200 \$1
Remove			
4) Change		Company of the state of the sta	
Add			-18-84
Remove			
5) Change			white the second
Add			
6) Change			
Add			
Remove			

	<mark>ding or adding add</mark> udditional sheets, if n	necessary).	(Be specific)			
		,				
						•
		•				·
						
	nendment provides	for an excha	inge, reclassific	ation, or cancell	ation of issued sh	ares.
if an an	ions for implementi	ing the amen	dment if not co	ntained in the a	mendment itself:	
provisi		cate N/A)				
provisi	not applicable, indi					
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The date of each amendment(s) adoption:	4-22-14	14 APR 28 PM 2: 38	, if other than the
date this document was signed.	.1	OF THE LANY OF STATE	
Effective date if applicable:	4-22-14	SECRETARY OF STATE TALE AHASSEF, FLORIDA	-
(n	o more than 90 days after ame	ndment file date)	
Adoption of Amendment(s) (CHEC)	r (mr)		
Adoption of Amendment(s) (CHEC	K ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for approximation and the shareholders was approximated and the shareholders		s cast for the amendment(s)	
The amendment(s) was/were approved by the sha must be separately provided for each voting gro			
"The number of votes cast for the amendment	ent(s) was/were sufficient for a	pproval	
by			
(voting	group)		
The amendment(s) was/were adopted by the boar action was not required.	rd of directors without shareho	lder action and shareholder	
The amendment(s) was/were adopted by the inco- action was not required.	orporators without shareholder	action and shareholder	
Dated4-22-1	4_		
0.0			
Signature	four		-
	et or other efficer — if directors rator — if in the hands of a rece		
appointed fiduciary by		Tion, musico, or other board	
	John Perm (Typed or printed name of p	ented	_
	(Typed or printed name of p	erson signing)	
	President	_	,
	(Title of person sign	ning)	