713000043152

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SECKLIASSEE PH DAIR

Name Oves. 6/19/13

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	_{lation:} Zephyrhill	s Airport Auto	Repair Inc	
DOCUMENT NUME	$O \setminus O \land O$	004315		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this mat	tter to the following:		
	Teresa Wolfe			
	Zephyrhills Airp	Name of Contact Person	air Inc	
		Firm/ Company		
	39242 South A	ve.		
		Address		
	Zephyrhills FI.	33542-5254		
		City/ State and Zip Code		
sos	E-mail address: (to be us	nsed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Teresa Wolfe		_{at (} 813	701-1524	
Name of Contact Person		Area Coo	le & Daytime Telephone !	Number
Enclosed is a check for	r the following amount made j	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	TALL DIS
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building		STATE OF THE PARTY

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

AUTO REPAIR INC (Name of Corporation as currently filed with the Florida Dept. of State)

P13000043152

nt(s) to

Lephyrhills Auto Repair Inc me must be distinguishable and contain the word "corporation"		The n
Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or the designation "Corp," "Inc," or the abbreviation." or the abbreviation.		ist contain
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)	NA	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	_
·		
If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		
Name of New Registered Agent Name of New Registered Agent		
Name of New Registered Agent NA (Florida	street address)	
Name of New Registered Agent New Registered Office Address: NA (Florida New Registered Office Address:	ress:	·
Name of New Registered Agent New Registered Office Address: NA (Florida New Registered Office Address:	street address) Florida (Zip Code)	
Name of New Registered Agent Name of New Registered Agent NA (Florida New Registered Office Address:	street address) Florida (Zip Code)	On

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:	ve, una san	ly Smith, Sr us an Ada.	A S
X Change	<u>PT</u>	John Doe	13 JUN SECRET
X Remove	<u>v</u>	Mike Jones	JUN 12 CRETARY AHASSE
X Add	<u>sv</u>	Sally Smith	سند مہر
Type of Action (Check One)	Title	Name	Address 55 5
1) NA Change		_	
Add			
Remove			
2) NA Change			
Add			
Remove			
3) NA Change			
Add			
Remove			
4) NA Change			
Add			
Remove			
5) NA Change			
Add			
Remove			
6) NA Change			
Add			
Remove			
Kemove			the south Part of the same of

. If amending or adding additional Articles, enter change(s) here:	FILED
(Attach additional sheets, if necessary). (Be specific)	13 JUN 12 PH 6: 4
	SECRETARY OF 54A TALLAHASSEE UT OR
	,
	· ·
. If an amendment provides for an exchange, reclassification, or cancellation o	f issued shares,
provisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A)	ent itself:
VA	
V.	
	· · · · · · · · · · · · · · · · · · ·
	A STATE OF THE STA

The date of each amendment(s) adoption: 06/06/2013
Effective date if applicable: 06/06/2013
(no more than 90 days after amendment file date)
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.
Dated 06/06/2013
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)
Teresa Wolfe
(Typed or printed name of person signing)
Registered Agent / Chairman /Treasurer

FILED
13 JUN 12 PH 6: 47
SECRETASSEE OF BOMBO

(Title of person signing)