## P13000044263

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: PHOENIX RODS	& SPEED, INC	•
DOCUMENT NUM	D12000044262		
The enclosed Article	es of Amendment and fee are so	ibmitted for filing.	
Piease return all cor	respondence concerning this ma	atter to the following:	
	VICTOR J. MAZZELLA, C	PA	
		Name of Contact Perso	on
	VICTOR J. MAZZELLA, C	PA.PA	
		Firm/ Company	
	1408 SE 17TH AVENUE, S	, ,	
		Address	
	CAPE CORAL FL 33990		
		City/ State and Zip Coo	de
	on concerning this matter, plea	sed for future annual repor	t notification)
VICTOR J. MAZZE	·	at (	772-2229
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Dep	partment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 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 C	Address  diment Section on of Corporations  entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL-12303

## Articles of Amendment to Articles of Incorporation of

PHOENIX RODS & SPEED, INC

(Name of Corporation as currently	y filed with the Floyida De	pt. of State)	
P13000044263			
(Document Number of	f Corporation (if known)		<del>.</del>
Pursuant to the provisions of section 607.1006. Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation :	adopts the following	ng amendment(s)
A. If amending name, enter the new name of the corporation:			
			_The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."			
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )			
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			<del></del>
	<del></del>		
D. If amonding the amintured areas of the control of			<del></del> -
<ol> <li>If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:</li> </ol>		ime of the	
Name of New Registered Agent			
the of the regime, earligen			_
(Florida stre	vet address)		_
	,	G1	
	(Cîțy)		Code) 📆
			21
New Registered Agent's Signature, if changing Registered Agent:	with and occupt the obligation	ne of the position	= ,
neter, weeep the approximent as registered agent. Tum juminar w	ин ини ассерь те открано.	ns of the position.	<u> </u>
			gr.eft.
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	(City)		Code) PRINT AND GO & F

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>	Name	Address
1) Change	V	BRYSON ADKINS	1002 SE 9TH STREET
$\frac{X}{X}$ Add			CAPE CORAL FL 33990
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change	••		
Add		<del></del>	
Remove			

Attach additional sheets, if necessary).	(Be specific)		
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If an amendment provides for an exchaprovisions for implementing the amen	ange, reclassification, or c	ancellation of issued s	<u>hares,</u>
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
☐ 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	
by	
Dated 4/8/2021	
Signature Raymon 2 6. Adhiin A  (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)	
RAYMOND G ADKINS JR	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	<del></del>