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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: JOB TIRES SEF	RVICES INC		
DOCUMENT NUMBER	P13000058422			
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.		
Please return all correspon	ndence concerning this ma	tter to the following:		
ES	ESTHER J MELENDEZ			
		Name of Contact Person	1	
EN	EMES OF PINELLAS INC			
_		Firm/ Company		
64	6447 PARK BLVD STE 6			
		Address		
PI	PINELLAS PARK, FL 33781			
		City/ State and Zip Cod	e	
EMES@	TAMPABAY.RR.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information co	ncerning this matter, pleas	se call:		
ESTHER J MELENDEZ		at (2897133	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	e following amount made	payable to the Florida Depa	artment 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)	
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

JOB TIRES SERVICES INC						
(Name of Corporat	tion as currently fi	iled with the Florida	Dept. of State	<u>;)</u>		
P13000058422						
(Docum	ment Number of Co	orporation (if known))			
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this <i>Flo</i>	orida Profit Corporal	tion adopts the f	following	g amendr	nent(s) to
A. If amending name, enter the new name of the c	orporation:					
					77	
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	p," "Inc," or "Co	". A professional co	ncorporated" o orporation nam	r the ab	_The ne bbreviati contain t	on
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADDRESS)	le: DRESS)					-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>ox</u>)				2016 1404 18	and the second s
D. If amending the registered agent and/or registe	ered office address	in Florida, enter th	e name of the		PH 2: 5	- M
new registered agent and/or the new registered	i office address:			1.7		
Name of New Registered Agent						
	(Florida street	address)				
New Registered Office Address:			, Florida_			
	(Ci	ty)		(Zip C	lode)	-
New Registered Agent's Signature, if changing Real Interest in the Interest in		and accept the oblig	gations of the po	osition.		
Sign	nature of New Regi	stered Avent if chan	aina			

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	PT	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	<u>Addres</u> s
1) Change	Р	JUSTO MARCIA	1080 16TH AVE SW
Add			LARGO FL 33770
X Remove			
2) Change	P	SEVILLA WILMER	4664 19TH AVE SOUTH
X Add			ST PETERSBURG FL 33711
Remove			
3) Change	PV	ANDINO BENITEZ OLGA P	4664 19TH AVE SOUTH
X Add			ST PETERSBURG FL 33711
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
•	
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(g nor approach, maloute 1971)	
· · · · · · · · · · · · · · · · · · ·	
	

	11/10/2016	
The date of each amendment(s)) adoption:	, if other than the
date this document was signed	·	
	1/10/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no mine than 20 days after amenanent file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date v Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
action was not required. The amendment(s) was/were:	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
action was not required.		
11/10/2	016	
Signature	a director, president or other officer – if directors or officers have not been	
selec	cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	JUSTO MARCIA	
	(Typed or printed name of person signing)	
	Р	
	(Title of person signing)	