# P130000 59485

(Requestor's Name)				
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ACCIENTARY OF STATE CORPORATION

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: 77. Landerdale Gellela / Repair Incomment number: P130000 59 485					
The enclosed Articles of Amendment and fee are submitted for tiling.					
Please return all correspondence concerning this matter to the following:					
Dobert Projton					
Name of Contact Person					
Please return all correspondence concerning this matter to the following:    Debevt Prestor					
888 intracocital Dr Apt 15D					
Address					
Ft. Curderdule FL 77704					
City/ State and Zip Code					
Recestor 454 @ gmail. com E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Poli Poston  at (959) 789 4294  Name of Contact Person  at (959) Area Code & Daytime Telephone Number					
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					

#### **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)

### Articles of Amendment to Articles of Incorporation of

Ft. Lauderdale Cellular Repair, Inc.	
(Name of Corporation as current	y filed with the Florida Dept. of State)
P13000059485	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association." or the abbreviation "	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Apt 15D
	Ft. Landerdult FL 73704
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	888 Intracogsteel Dr Apt 15 D
	Frilanderdale-Fl 33704
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent SSS in	tra (ou stal Dr Agt 15D)
	A
New Registered Office Address: Ftland	(City) Florida FL 37704 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to  Signature of New In	

## 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 <math>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 Jones			
X Add	<u>\$V</u>	Sally Sn	n <u>ith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s	
1) Change		_			
Add					
Remove					
2) Change					
Add		_			
Remove					
3 ) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
S) Changa					
5) Change					
Add					
Remove					
6) Change		_	<del></del>		
Add					
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del></del>	
	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) addate this document was signed.	option:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after am	endment file date)
Note: If the date inserted in this bl document's effective date on the Dep		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of vot- ficient for approval.	es cast for the amendment(s)
	oved by the shareholders through voting groeach voting group entitled to vote separately	
"The number of votes east f	or the amendment(s) was/were sufficient for	approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	nted by the board of directors without shareh-	older action and shareholder
action was not required	oted by the incorporators without shareholder	r action and shareholder
Dated	23/18 (Cobert Pre	Jon
(By a disselected	rector, president or other officer – if director, by an incorporator – if in the hands of a rec d fiduciary by that fiduciary)	
	(Typed or printed name of person	~
-	(Typed or printed name of person	signing)
_	President/Ouner/	Incorportor/Registered Agent
	/ (Title of person signir	.Agent