P1300077342

(Requestor's Name)
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2018 OCT -2 AM II: 36 SEGRETARY OF STATE

C. GOLDEN 0CT -3 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TOOLS CENTER	CA INC	
DOCUMENT NUM	P13000077342		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	NEIRA ZAMBRANO		
		Name of Contact Person	1
		Firm/ Company	
	6288 NW 186TH STREET A	APT 110	
		Address	· · · · · · · · · · · · · · · · · · ·
	HIALEAH, FL 33015		
		City/ State and Zip Cod	e
tools	centerca@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
NEIRA ZAMBRANO		at (_786	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□S43.75 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		Amene Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301



September 11, 2018

NEIRA ZAMBRANO 6288 NW 186TH STREET APT. #110 HIALEAH, FL 33015

SUBJECT: TOOLS CENTER CAINC

Ref. Number: P13000077342

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

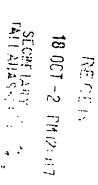
The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 918A00018852



Articles of Amendment to Articles of Incorporation of

FILED

2018 OCT -2 AM 11: 36

TOOLS CENTER CAINC

	(* *
(Name of Corporation as curren	ntly filed with the Florida Dept. of State) TALL AHASSES
213000077342	
(Document Number	of Corporation (if known)
tursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporat "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
	N/A
B. 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)	N/A
D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office addre	<u>!\$\$!</u>
Name of New Registered Agent N/A	
(Florida :	street address)
New Registered Office Address:	Florida
THE THE SHIP CONTROL THE THE SHIP CONTROL SH	(City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familia	r wun ana ассері ine ovuganons ој те ромноп.
Sionature of New	x Registered Avent, 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:

I' = 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 Doc		
X Remove	<u> </u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	S	JORGE RUIZ	2653 Giardino Loop,	
X Add			Kissimmee, FL 34741	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
	
<u></u>	
·	
an amendment provides for an exchorovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
•	

The date of each amendment(s) ad	loption:	, if other than the
date this document was signed.		
Augu	ust 30, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	• •	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) efficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 ado action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	opted by the incorporators without shareholder action and shareholder	
August 30 Dated Signature	Con Dead	_
(B <u>y a dr</u> selected	trectors be them by other officer – if directors or officers have not been d by an incorporator – if in the hands of a receiver, trustee, or other court told fiduciary by that fiduciary)	
	ALFREDO ZAMBRANO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u></u>