Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

(((H18000088090 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6390

From:

MAR 2 0 2018

Account Name

: FASTKIT CORP Account Number: I20100000009 : (305)599-0839

Phone Fax Number

: (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN LAZARO BODY SHOP INC

MAR 19 PH

Certificate of Status Certified Copy Page Count Estimated Charge \$35.00

Electronic Filing Menu

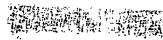
Corporate Filing Menu

Help

PALED

Articles of Amendment Articles of Incorporation of

18 HAR 19 AM 7: 42



LAZARO BODY SHOP INC

(Name o	of Corporation as current	ly filed with the Florida Dept. of S	itate)
·	P130000	081069	
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 507, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc," or	"Co". A professional corporation	l" or the abbreviation name must contain the
		N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	cable: OFFICE BOX)	N/A	
			4h.a
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address	ress in Piorian, enter the name of	tne
	OBEDEL CAMEJO CAN		
Name of New Registered Agent	4851 E 11 AVE UNIT B		
		reel uddress)	
New Registered Office Address:	HIALEAH	·	33013
		(City), Flor	(Zip Code)
New Registered Agent's Signature, if a I hereby accept the appointment as regist	hanging Registered Agen ared agent. I am familiar	ti with and accept the obligations of t	he position.
*	(Maybe)		
	Signature of New	Registered Agent, 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:

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> 74</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>v2</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
l)Change	P	OBEDEL CAMEJO CAMEJO	4851 E 11 AVE UNIT B
X Add			HIALEAH, FL 33013
Remove			
2) Change	P	LAZARO PEREZ	9555 NW 32ND CT
Add			MIAMI, FL 33147
X Remove			
3) Change			
Add			
Remove			<u></u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ)Change			
Add			
Remove	•		
			· · · · · · · · · · · · · · · · · · ·

E. If amending or adding additional Articles (Attach additional sheets, if necessary). (if	Be specific)	<u>, -1,</u> .					•
N/A							
			·		· · · · · · · · · · · · · · · · · · ·		
							
					···		
-				;			•
							
	···	····			·····		
			-				
	······································			· · · · · · · · · · · · · · · · · · ·			_
		 			<u> </u>		
				· · · · · · · · · · · · · · · · · · ·			
F. If an amendment provides for an exchange	e, reclassific	ation, or cae	ceilation of	issued share:	<u>3</u> .		
provisions for implementing the nmenda (if not applicable, indicate N/A)	rent if not co	ntained in t	<u>ne amendme</u>	nt itself:			
OBEDEL CAMEJO CAMEJO	CHADEC						
					<u> </u>		
LAZARO PEREZ 0 S	SHARES		_				
			_ , <u></u>			·	
							

The date of each amendment(s) adoption:	MARCH 15, 2018	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	,
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date to of State's records.	will not be listed as th
Adoption of Amendment(s) (9	CHECK ONE)	
The amendment(3) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes east for the amendment(s) or approval.	
	the shareholders through voting groups. The following statementing group entitled to vote separately on the amendment(s):	·
	nendment(s) was/were sufficient for approval	
by	· · · · · · · · · · · · · · · · · · ·	
C	voting group)	
The amendment(s) was/were adopted by the action was not required.	he board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	he incorporators without shareholder action and shareholder	
MARCH 16, 2018		
Dated	<u> </u>	
Signature Z (lau)	P	
(By a director, pr	resident or other officer - if directors or officers have not been	
	ncorporator – if in the hands of a receiver, trustee, or other court acy by that (iduciary)	
	OBEDEL CAMEJO CAMEJO	
·	(Typed or printed name of person signing)	
	PRESIDENT	
	(Tide of caston signing)	