

PI3000087602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

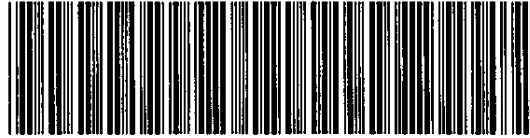
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 JUN 30 AM 10:55

JUL 7 2016

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: A.G.M. RIMS AND TIRE CORP.

DOCUMENT NUMBER: P13000087602

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stewart Marcantoni
Name of Contact Person
A.G.M. Rims and Tires
Firm/ Company
7905 Mitchell Ranch Road
Address
New port richy, Fl 34655
City/ State and Zip Code

stewmarcantoni@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stewart Marcantoni at (727) 2361730
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
- \$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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

A.G.M. Rims and Tire CORP.

2016 JUN 30 AM 10:55

(Name of Corporation as currently filed with the Florida Dept. of State)

p13000087602

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

A.G.M Rims and Tires Unlimited Corp.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
*(Principal office address **MUST BE A STREET ADDRESS**)*

6621 Massachusettes Ave. New port richey, Fl 3461

C. Enter new mailing address, if applicable:
*(Mailing address **MAY BE A POST OFFICE BOX**)*

6621 Massachusettes Ave. New Port Richey, Fl. 3465

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent N/A

(Florida street address)

New Registered Office Address: N/A, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

Example:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>PD</u>	<u>Allen MacMeeken</u>	<u>7649 Montague Loop</u>
<input type="checkbox"/> Add			<u>New Port Richey, Fl 34655</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>ST</u>	<u>Allen Macmeeken</u>	<u>7649 Montague Loop</u>
<input type="checkbox"/> Add			<u>New Port Richey, Fl 34655</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>PD</u>	<u>Stewart Marcantoni</u>	<u>7905 Mitchell Ranch Rd</u>
<input checked="" type="checkbox"/> Add			<u>New Port Richey, Fl 34655</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>ST</u>	<u>Stewart Marcantoni</u>	<u>7905 Mitchell Ranch Rd</u>
<input checked="" type="checkbox"/> Add			<u>New Port Richey, Fl 34655</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: N/A
date this document was signed.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Effective date if applicable: N/A
(no more than 90 days after amendment file date) **2016 JUN 30 AM 10:55**

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- 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 Allen G. MacMecken
(voting group)"

- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 6/27/2016

Signature *A MacMecken* P.O.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)

Allen G. Macmecken
(Typed or printed name of person signing)

President, Director, Secretary, Treasurer
(Title of person signing)

DURABLE POWER OF ATTORNEY

I, **ALLEN GEORGE MAC MEEKEN**, Date of Birth: November 22, 1988, the principal, hereby designates **Frederick John Mac Meeken**, Date of Birth: February 6, 1963, as my attorney-in-fact and Agent (hereinafter "Agent") in my name and for my benefit to exercise the rights, power and authority stated herein as pursuant to all laws and statutes.

Upon the event of my disability or legal incapacitation, my Agent, **Frederick John Mac Meeken**, has the authority to act in my place in any way that is lawful regarding the following powers:

To maintain and manage, buy, sell, or lease any of my real or personal property.

To conduct any and all banking transactions including liquidating, consolidating, endorsements, deposits, transfers, withdrawing funds and bill pay.

To prepare, sign, and file tax returns.

To manage Automobile Insurance, to complete information in relation to any/all transactions involving the certificate of title, registration for vehicles, and persons/vehicles insured.

To negotiate with credit lenders for exact pay-off of debts and the closing of accounts once the debt is resolved.

To do everything necessary in exercising any of the powers herein granted as fully as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that my Agent shall lawfully do or cause to be done by virtue of this Power of Attorney and the powers herein granted with **no specific limitations**.

This Power of Attorney shall expire on 6-16-21. After such time and date, **Frederick John Mac Meeken** shall no longer have authority to sign or endorse any drafts,

checks or instruments on my behalf, but all signatures or endorsements previously made by **Frederick John Mac Meeken** on my, **Allen George Mac Meeken's**, behalf, shall be valid.

IN WITNESS WHEREOF, I have executed and sealed this instrument this 16 day of June, 2016.

Signed, Sealed, and Delivered in the Presence of:

AGM
(Principal)

FJ Mac Meeke
(Agent)

Print Name: Allen macmeeken

Print Name: Frederick John MacMeeke

STATE of FLORIDA

COUNTY of PINELLAS

SWORN TO AND SUBSCRIBED BEFORE ME, on this 16 day of June, 2016, by

Allen George Mac Meeken, the principal, who is personally known to me or has produced

Pinellas County Jail as identification.
Identification

Said individual executed the within Power of Attorney and acknowledged the within Power of Attorney to be freely and voluntarily executed for the purposes therein recited.

D. M. Freytag
(Signature of Notary Public)



(Print, Type, or Stamp Commissioned Name of Notary Public)

6/25/17
Date of Expiration and Number of Commission