PIUMAIB

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400265207554

10/10/14--01015--015 **\$2.50

And

OCT 20 2014

R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations

Pro Towing NAME OF CORPORATION: _ **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Cossandia 4. Mcman Name of Contact Person Pro Towno Cor Firm/ Company MCMONON 2 6 1 Choo. Con E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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: \$\$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

FILED 14 OCT 10 PM 3:41

Pro Towing Corp.	TAEL	MI FARY OF STATE
(Name of Corporation as currently filed with the	Florida Dept. of State)	PHASSEG, ELONDA
(Document Number of Corporation	(if known)	·
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s <i>Florida Profit Corporation</i> adopts	the following amendme
. If amending name, enter the new name of the corporation:		
NIA		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation	
Enter new principal office address, if applicable:	2561 N. Forsytt	rd.
Principal office address <u>MUST BE A STREET ADDRESS</u>)	2561 N. Forsytt	
	Orlando,FL.329	507
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	
D. If amending the registered agent and/or registered office ad		the_
new registered agent and/or the new registered office addre	<u>ss:</u>	
Name of New Registered Agent NIA		
(Florida s	treet address)	
(1107111)		
New Registered Office Address: New Registered Office Address:	, Florida	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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</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	10	Jord (Journales '21.	QUODIXIE BEILE DU OCIONDO, FL.32812
Remove 2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add	<u></u>		
Remove			

NIA				
·				
			<u> </u>	
·				
·				
	,			
				•
n amendment provides i ovisions for implementin	for an exchange, recl ng the amendment if	assification, or ca not contained in t	ncellation of issued sh he amendment itself:	ares,
(if not applicable, indic	cate N/A)			
NIA				
· · · · · · · · · · · · · · · · · · ·				
			-	

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.	
	ed by the shareholders through voting groups. The following statement the 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)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	d by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder	
Dated	14	
Simustons	Millell	
Signature(By a direc	to, president or other officer – if directors or officers have not been	
selected, b	an incorporator – if in the hands of a receiver, trustee, or other court	
appointed	fiduciary by that fiduciary)	
	Cassandra Y. mcmahon	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	