P14000051704

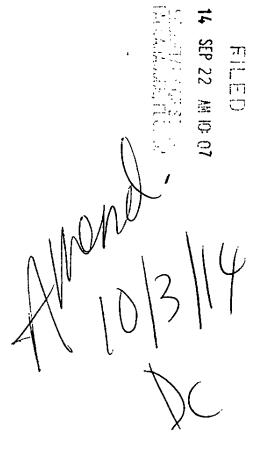
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 11, 2014

MANUEL SANCHEZ SANCHEZ & PADRON ASSOCIATES INC 953 17TH STREET VERO BEACH, FL 32960

SUBJECT: DOMINICAN TIRE AUTO REPAIR & SERVICES INC

Ref. Number: P14000051704

We have received your document for DOMINICAN TIRE AUTO REPAIR & SERVICES INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Darlene Connell Regulatory Specialist III

Letter Number: 714A00019505

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14 SEP 22 PH 2: 45

REPARTER A STATE OF THE STA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	P1400005170	14	
DOCUMENT NUM	IBER: P1400005170	<u> </u>	
The enclosed Article	s of Amendment and fee are su	ubmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	MANUEL SANCE	HEZ	
		Name of Contact Person	
	SANCHEZ AND		CIATES INC
	953 17 TH ST	Firm/ Company	
		Address	
	VERO BEACH F		
		City/ State and Zip Code	!
R.A.	ANITEL SM1 ACM	All COM	
For further informati	on concerning this matter, pleas	sed for future annual report i	
For further informati	E-mail address: (to be use on concerning this matter, please	sed for future annual report of seconds: at (786	247-8041
For further information MANUEL SA	E-mail address: (to be use on concerning this matter, please ANCHEZ e of Contact Person	sed for future annual report of seconds: at (786 Area Coc	247-8041 de & Daytime Telephone No
For further information MANUEL SA	E-mail address: (to be use on concerning this matter, please ANCHEZ	sed for future annual report of seconds: at (786 Area Coc	247-8041 de & Daytime Telephone No
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For further information MANUEL SA Name Enclosed is a check to \$35 Filling Fee	E-mail address: (to be use on concerning this matter, please ANCHEZ of Contact Person for the following amount made \$43.75 Filing Fee & Certificate of Status	sed for future annual report of second secon	247-8041 de & Daytime Telephone Nortment of State: \$52.50 Ning Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
For further information MANUEL SAN Name Enclosed is a check to \$35 Filing Fee	E-mail address: (to be use on concerning this matter, please ANCHEZ of Contact Person for the following amount made \$43.75 Filing Fee & Certificate of Status ailing Address mendment Section vision of Corporations	sed for future annual report of second secon	247-8041 de & Daytime Telephone Northern of State:
For further information MANUEL SA Name Enclosed is a check of the second of the sec	E-mail address: (to be use on concerning this matter, please ANCHEZ e of Contact Person for the following amount made \$43.75 Filing Fee & Certificate of Status ailing Address mendment Section	sed for future annual report of the second s	247-8041 de & Daytime Telephone Nortment of State:

Articles of Amendment to· ` Articles of Incorporation of

DOMINICAN TIRE AUTO REPAIR & SERVICES INC

(Name of Corporation as currently filed with the	Florida Dept. of State)
P14000051704	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	771
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 name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	N/A
	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	N/A
	N/A
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
N/A	treet address)
(Florida s	treet address)
New Registered Office Address: N/A	Florida N/A
(Ciŋ	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of New Registered	with and accept the obligations of the position.
· / ·	

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:	e, ana sai	y Smun, SV as an Ada.	
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)	Title	Name	Address
1) Change	VP	RAMON R HERNANDEZ	1240 BARD LN NE
Add			PALM BAY FL 32905
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
N/A	
F. <u>If a</u> pro	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A	

The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	 08/29/2014	
Enective date it applicable;	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	are approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by N/A	»	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated_08/	29/2014	
Signature _	4 falled design	
(1	By a director, president or other officer – if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ippointed fiduciary by that fiduciary)	
	ATANAY, KATERING	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	