P14000069375

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(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GILENS AUTO REPAIR, INC. DOCUMENT NUMBER: P14000069375	15 JAN SLUKCI FALLAHO
DOCUMENT NUMBER: 177000007373	12.2
The enclosed Articles of Amendment and fee are submitted for filing.	<u> </u>
Please return all correspondence concerning this matter to the following:	AH 3:
GLENROY G. ROSE Name of Contact Person Glens And Repair, Inc. Firm/ Company 701 N. Wabash Ave Address	23 23 23 24 25 25 26 26 27
Name of Contact Person	
Glens Auto Repair, Inc.	-
rimi Company	
TOI N. Wabash Ave	-
Address	
Lakeland, FL 33875	_
City/ State and Zip Code	
gnmatthew@hotmail.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
George Mathew at 883, 944-5189	
Name of Contact Person Area Code & Daytime Telephone Number	r
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate Oppy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

Articles of Ame	endment $\frac{7}{2}$ $\frac{5}{5}$
to	C.C. C. Harry
Articles of Incor	poration
of	2
GIENS AUTO A	
(Name of Corporation as currently filed with the Flor	
P14000069375	
(Document Number of Corporation (if k	mown) EFF 33
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatitis</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
GGR INC	TI
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	701 N. WABASH AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	TOI N. WABASH AVE LAKELAND, FL 33815
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	701 N. WABASH AVE LAKELAND, PL 33815
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	t address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position.
Signature of New Registered Ag	eent, 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	PT John I	<u>Ooe</u>	
X Remove	V Mike J	<u>lones</u>	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		100	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ets, if necessary).	(Be specific)			
					
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n amendment pro		Tittent II not conte	angeu in the amei	minent resen.	
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n amendment provisions for imple (if not applicable	, indicate N/A)				
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n amendment pro ovisions for imple (if not applicable	e, indicate N/A)				

the date of each amendment(s) adoption: date this document was signed.	, if other than the
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. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The foli- must be separately provided for each voting group entitled to vote separately on the amend	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	harcholder
Dated01/23/15	
Signature (By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	
GILEN ROYGIRDSE.	
(Typed or printed name of person signing	ng)
PRESIDENT.	
(Title of person signing)	