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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TUSON'S GO	irage Towis	iq & Precovery Inc.	
DOCUMENT NUMBER: P140000 85			
The enclosed Articles of Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
Timothy Sec	Name of Contact (craon		
Tysun's Gerrage -	Towing & Re	ecven Inc.	
	roe St. Address		
Tall FL	<mark> 3230 [</mark> City/ State and Zip Code		
	City/ State and Zip Code	2	
Tysons Recove E-hail address: (to be used	ry 1009 @ y forduture annual report	notification)	
For further information concerning this matter, please of	call:		
Name of Contact Person	at (<u>\$50</u>	544-1787	
Name of Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for the following amount made page	yable to the Florida Depa	artment of State:	
\$35 Filing Fee Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to

=1LED 2023 AUG-4 AM 10: 36 Articles of Incorporation of

Tyson's Earage Tou	ung & Becou	en Inc	
		the Florida Dept. of State)	FIFT CHEEK
	20085470		
	iment Number of Corporation		
Pursuant to the provisions of section 607,1006, Florietts Articles of Incorporation:	da Statutes, this Florida Proj	fit Corporation adopts the fo	llowing amendment(s) t
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the word " "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	: " or "Co". A profession	r "incorporated" or the abb al-corporation name must	reviation "Corp.," contain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL	<u></u> DDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(O.X)		
D. If amending the registered agent and/or registered agent and/or the new registered	tered office address in Flor d office address:	ida, enter the name of the	
Name of New Registered Agent		<u> </u>	
	(Florida street address)		
New Registered Office Address:		, Florida_	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	egistered Agent: . I am familiar with and acc	rept the obligations of the po	osition.
Sig	gnature of New Registered A	gent, if changing	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: - <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	<u>Carolyn Paige Holden</u>	1609 S monroe St Tall FL 32301
X Add			10(1 FL 32501
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u>-</u>		
Add			
Remove			

tach additional sheets, if necesse	l Articles, enter chan ary). (Be specific)				
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	n exchange, reclassifi	cation, or cancellat	non of issued shar	<u>es.</u>	
an amendment provides for a		ontained in the am	endment itself:		
provisions for implementing the	e amendment if not c	OHICA III III III			
an amendment provides for a provisions for implementing th (if not applicable, indicate N	e amendment if not c	<u> </u>			
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The date of each amendment(s) adoption:, if other than the
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 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 Timothy Tysun - Owner President
Dated_8 4 2023 Signature 2 = 7 = -
Signature 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)
(Typed or printed name of person signing)
President (Title of person signing)

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