P1400092244

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(City	/State/Zip/Phone	#)
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(Doc	ument Number)	
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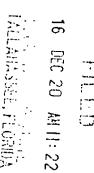
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JAN 0 4 2019 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OPTIMA USA AN	D REPAIR INC	
DOCUMENT NUMB	ER: P14000092244		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	ter to the following:	
	INES MARIA CALZADILL	A	
-		Name of Contact Persor	1
•		Firm/ Company	<u> </u>
	11815 SW 232 LN		
•		Address	
	MIAMI, FL 33032		
- -		City/ State and Zip Code	e
For further information	a concerning this matter, pleas		838-3591
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations of Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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of Corporation as current	tly filed with the Florida De	ept. of State)
(Document Number of	of Corporation (if known)	
1006, Florida Statutes, this	: Florida Profit Corporation	adopts the following amendment(s)
ime of the corporation:		
		The new
ation "Corp." "Inc." or	"Co". A professional corp	rporated" or the abbreviation
if annlicable:	INES MARIA CALSAI	DILLA
TREET ADDRESS)	11815 SW 232 LN	7. 6
	MIAMI, FL 33032	
<u>cable:</u> OFFICE BOX)		20
		22
		name of the
INES MARIA CALSAD	ILLA	
11815 SW 232 LN		
(Florida s	treet address)	
MIAMI		33032
	(City)	, Florida
	1.1.7.	. ,
hanging Registered Agen	<u>it:</u>	
tered agent. I am familiar	with and accept the obligat	ions of the position.
. Was	We.	
Signature of Apre	Projectoral Areast if always	10
	(Document Number of 1006, Florida Statutes, this time of the corporation: Itain the word "corporation ation "Corp." "Inc." or tion," or the abbreviation if applicable: TREET ADDRESS) Cable: OFFICE BON INES MARIA CALSAD 11815 SW 232 LN (Florida s MIAMI	dain the word "corporation," "company," or "incoration "Corp." "Inc." or "Co". A professional corporation," or the abbreviation "P.A." INES MARIA CALSAI INES MARIA CALSADILLA INES MARIA CALSADIL INES MAR

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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	INES MARIA CALZADILLA	11815 SW 232 LN
Add			MIAMI, FL 33032
Remove			
2) Change	PVPD	FERNANDO TOLL	11815 SW 232 LN
Add			MIAMI, FL 33032
X Remove			
3) Change	Τ΄	AROLDO HERNANDEZ	11815 SW 232 LN
Add			MIAMI, FL 33032
X Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	dding additional Ar sheets, if necessary).	. (Be specific)			
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'an amendmer	<u>it provides for an ex</u>	change, reclassifi	cation, or cancellat	tion of issued share	<u>:S,</u>
provisions for i	implementing the an	nendment if not co	ontained in the am	endment itself:	
	icable, indicate N/A)				
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	12/11/2018	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
	2/11/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after ame	endment file date)
Note: If the date inserted in thi document's effective date on the	block does not meet the applicable statutory fi Department of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of vote sufficient for approval.	s cast for the amendment(s)
The amendment(s) was/were a must be separately provided	pproved by the shareholders through voting grou for each voting group entitled to vote separately	nps. The following statement on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for a	approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	idopted by the board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder	action and shareholder
12/11/2 Dated SignatureX	/ \	
(By sele	a director, president or other officer – if directors etcd, by an incorporator – if in the hands of a reconinted fiduciary by that fiduciary)	
	INES MARIA CALZADILLA	
	(Typed or printed name of person	signing)
	PRESIDENT	
	(Title of person signin	lg)