P14000096030

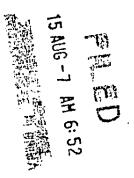
(Re	questor's Name)	
(Ad	dress)	
· (Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Ви	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 9, 2015

KATHLEEN STAKERMANN M. STERENSTEIN AUTO REPAIR, INC. 701 BELVEDERE ROAD WEST PALM BEACH, FL 33415

SUBJECT: M. STERENSTEIN AUTO REPAIR, INC.

Ref. Number: P14000096030

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Page 1 thru 3 is missing from document.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 415A00014393

S AUG -7 PM 4: 42

COVER LETTER

TO: Amendment Sec Division of Cor		•		温。さ
NAME OF CORPO	PRATION: M. Sterenstein Auf	to Repair, Inc.		
DOCUMENT NUMBER: P14000096030				
_	s of Amendment and fee are su	ibmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Kathleen Stakermann			
		Name of Contact Pers	on	
	M. Sterenstein Auto Repair,	Inc.		
	·	Firm/ Company		
	701 Belvedere Road			
		Address		
	West Palm Beach, FL 33415			
		City/ State and Zip Co	ode	
msta	erensteinautorepair@gmail.com	1		
	· · · · ·	sed for future annual repo	rt notification)	_
	`	•	•	
For further informati	on concerning this matter, pleas	se call:		
Marcelo Sterenstein		at (<u>561</u>	460-4757	
Name of Contact Person			Code & Daytime Telephone N	umber
Enclosed is a check f	or the following amount made	payable to the Florida De	partment of State:	
■ \$35 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)	
<u>M</u> .	illing Address	Stree	et Address	
	nendment Section	Amer		
	vision of Corporations		ion of Corporations	
	D. Box 6327		on Building	
Ta	llahassee, FL 32314	2661	Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



M. Sterenstein Auto Repair, Inc.		
(Name of Corporation	as currently filed with the Florida Dept. of S	State) 💨 👩
214000096030		5
(Documen	nt Number of Corporation (if known)	The state of the s
Pursuant to the provisions of section 607.1006, Florida Starticles of Incorporation:	tatutes, this Florida Profit Corporation adopts	the following amendment(s)
. If amending name, enter the new name of the corp	oration:	
n/a		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A professional corporation	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE	n/a	
Frincipal office address <u>most be A street Addre</u>	<u></u>	
C. Enter new mailing address, if applicable:	,	
(Mailing address MAY BE A POST OFFICE BOX)	n/a 	
D. If amonding the registered exact and/or registered	l office address in Florida, enter the name of	· · · · · · · · · · · · · · · · · · ·
 If amending the registered agent and/or registered new registered agent and/or the new registered of 		the
Name of New Registered Agent n/a		
	(Florida street address)	
New Registered Office Address:	, Flo	rida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	torad Agant:	
hereby accept the appointment as registered agent. I a		he 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 <math>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	V	Kathleen Stakermann	P.O. Box 268512	
XAdd			Weston, FL 33326	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

. <u>If amending or a</u> (Attach <i>additiona</i>	dding additional A sheets, if necessary	rticles, enter chi	ange(s) here:)			
(Attach adamona	sneers, y necessury	у. (Бе зресую)	,			
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. If an amendmen	t provides for an emplementing the a	xchange, reclass	ification, or ca	uncellation of is	ssued shares,	
	icable, indicate N/A		i contameu tii	the amendmen	t itseit.	
Fifty one shares of t	he total shares (100)	are transferred t	o Kathleen Sta	kermann.		
		. <u>-</u>				
					Name of Table	
			<u></u>			
						
	_ _	 				

, if other than the
nent file date)
iem jne uuiej
requirements, this date will not be listed as the
st for the amendment(s)
The following statement he amendment(s):
oval
"
action and shareholder
on and shareholder
officers have not been trustee, or other court
, it usice, or other court
ing)

(Title of person signing)