P15000 010 279

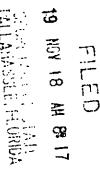
(1	Requestor's Name)			
(,	Address)			
(,	Address)			
(1	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
((Business Entity Name)			
((Document Number)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



600336711776

11/18/19--01020--028 **35.00



DEC 1 7 2019 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ARINE DETAIL INC	;					
DOCUMENT NUMBER: P150000102	79						
The enclosed Articles of Amendment and	fee are submitted for f	iling.					
Please return all correspondence concerning	ng this matter to the fol	llowing:					
LEONCIO ARANG) CABRERA						
1.500 MADAUS 0		Contact Person	·				
LEO'S MARINE D							
		/ Company					
115 10TH ST EAS							
54445779 51 9	Address						
PALMETTO, FL 3							
	City/ Stat	e and Zip Code					
E-mail address	: (to be used for future	annual report ne	otification)				
For further information concerning this ma	itter, please call:						
LEONCIO ARANO CABRERA	,	704	805-0401				
Name of Contact Person		\	& Daytime Telephone Number				
Enclosed is a check for the following amount	unt made payable to th	ne Florida Depart	ment of State:				
☐ \$35 Filing Fee ☐\$43.75 Filing Certificate of	f Status Certifie	d Copy onal copy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassec, FL 32314	s	Division Clifton E 2661 Exc	ent Section of Corporations				

Articles of Amendment to Articles of Incorporation of

LEO'S MARINE DETAIL INC

EEG 3 MARKING DETAIL ING				<u> </u>
·	on as currently f	iled with the Florida Dep	t. of State)	
P15000010279				
(Docum	nent Number of C	orporation (if known)		
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this Flo	orida Profit Corporation a	dopts the following	; amendment(:
A. If amending name, enter the new name of the co	orporation:			
				The new
name must be distinguishable and contain the wor "Corp" "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	," "Inc." or "Co	. A professional corpor	orated" or the ab ation name must c	phreviation
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADI</u>				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>DX</u>)			
D. If amending the registered agent and/or registenew registered agent and/or the new registered		s in Florida, enter the nat	ne of the	
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:			, Florida	
	(C	ity)	tZip C	(ode)
New Registered Agent's Signature, if changing Reg	gictared Agents			छ
I hereby accept the appointment as registered agent.		h and accept the obligation	is of the position.	ž n
	-	- -	<u> </u>	FILED
			jn m	
	variance of Man. D	detained to an Walnusteen		
Sign	iaiure oj ivew keg	istered Agent, if changing	골깔	38

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	PT	John Do	<u>c</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP		THOMAS LARA NARES	115 10TH ST W LOT 89
A Add		_		PALMETTO,FL 34219
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove			`	
6) Change				
Add				
Remove				

Attach addinimai s	<mark>ling additional Arti</mark> heets, if necessary).	(Be specific)	-		
	,				
		~			
					
			•		
					· · · · · · · · · · · · · · · · · · ·
					·
			·		
			•		
					
<u> </u>	orovides for an excl plementing the ame	ndment if not or	eation, or cancella	ition of issued sha	res,
(if not applied	ible, indicate N/4)	nument ii not ct	mianicu in the an	ienament itse <u>it.</u>	
, , , , , ,	•				
					
					
		 			

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	21/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	the more than 20 days after an intrinsicing the thirty	
Note: If the date inserted in this I document's effective date on the Do	block does not meet the applicable statutory filing requirements, the partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendmatficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following started 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		
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
10/21/201	9	
DatedSignature		
(By a c selecti	director, president or other officer – if directors or officers have not bed, by an incorporator – if in the hands of a receiver, trustee, or other need fiduciary by that fiduciary)	
	LEONCIO ARANO CABRERA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	