## PISTON MONT

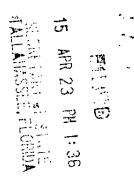
(Re	equestor's Name)	
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APR 29 2015

R. WHITE

## **COVER LETTER**

NAME OF CORP	PORATION: Hutchins & Hutchins Corp	
	MBER: P15000028010	
The enclosed Artic	eles of Amendment and fee are submitted for filing.	
Please return all co	prrespondence concerning this matter to the following:	
	Trina Hutchins	
	Name of Contact Person	
	Hutchins & Hutchins Corp	
	Firm/ Company	
	121 Triple Diamond Blvd	
	Address	<del></del>

garageservicetoday@gmail.com

Venice, FI 34275

E-mail address: (to be used for future annual report notification)

City/ State and Zip Code

For further information concerning this matter, please call:

Trina Hutchins	at (941	955-9441
Name of Contact Person		Daytime Telephone Number
Enclosed is a check for the following amount made pays  \$35 biting Fee  Carpfigure of Status	l\$43.75 Filing Fee & Certified Copy	ent of State:  \$\frac{1}{5}52.50 \text{ Filing Fee} \text{ Certificate of Status Certified Copy (Additional Copy is enclosed)}

enclosed enclosed

TO: Amendment Section

**Division of Corporations** 

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address** 

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

15 APR 23 PH 1:36

iment(s) to

(Name of Companytion on supports, filed with	STATE OF BE	
(Name of Corporation as currently filed with	the Florida Dept. of State) WALLAHASSEE,	
15000028010	,,,==-	
(Document Number of Corporati	ion (if known)	
suant to the provisions of section 607.1006, Florida Statutes, Articles of Incorporation:	this Florida Profit Corporation adopts the followi	
if amending name, enter the new name of the corporation	<u>n:</u>	
ne must be distinguishable and contain the word "corpo orp.," "Inc.," or Co.," or the designation "Corp," "Inc," d "chartered," "professional association," or the abbreviat	or "Co". A professional corporation name must	
Enter new principal office address, if applicable:	121 Triple Diamond Blvd	
incipal office address <u>MUST BE A STREET ADDRESS</u> )	Unit #17	
	Venice, FL 34275	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	121 Triple Diamond Blvd	
(Manning Busicess MAT MEAT TOST OF TICL BOX)	11!1 44.7	
	Unit #17	
	Venice, FL 34275	
If amending the registered agent and/or registered office new registered agent and/or the new registered office ad-	Venice, FL 34275  address in Florida, enter the name of the	
	Venice, FL 34275  address in Florida, enter the name of the	
new registered agent and/or the new registered office add  Name of New Registered Agent	Venice, FL 34275  address in Florida, enter the name of the	
Name of New Registered Agent  (Flori	Venice, FL 34275  address in Florida, enter the name of the dress:	

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		<del></del>		
Add Remove				
2) Change		_	<del></del>	
Add Remove				
3) Change	<del></del>	<del></del>		
Add Remove		•		
4) Change		_	*****	
Add				
Remove			•	
5) Change		_		
Remove				
6) Change	<del></del>	-		
Add				

amending or adding a ttach additional sheets,	if necessary).	(Be specific)			
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an amendment provid provisions for impleme (if not applicable, in	enting the amen	nge, reclassifi dment if not c	cation, or can ontained in th	cellation of iss e amendment	ued shares, itself:
	<del></del>				
	**************************************				· · · · · · · · · · · · · · · · · · ·
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				··· · · · · · · · · · · · · · · · · ·	·

The date of each amendment(s) adoption: 03/25/2015 date this document was signed.	, if other than the
02/05/0045	
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 amendment by the shareholders was/were sufficient for approval.	(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following staten must be separately provided for each voting group entitled to vote separately on the amendment(s):	ieni
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	ler
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_04/16/2015	
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 con appointed fiduciary by that fiduciary)	ırt
Trina Hutchins	
(Typed or printed name of person signing)	
VP	
(Title of person signing)	<del></del>