# P15000048405

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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: AP AUTO BODY	& DIAGNOSTIC INC.				
DOCUMENT NUM	P15000048405					
The enclosed Articles	s of Amendment and fee are su	ibmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	MIGUEL A. PENARANDA					
	<del>-</del>	Name of Contact Perso	n	_		
	AP AUTO BODY & DIAG?	NOSTIC INC.				
		Firm/ Company		_		
2867 SW 38TH AVENUE						
		Address				
	MIAMI FL 33134					
		City/ State and Zip Cod	e			
jarb.	solutions@hotmail.com			Es :		
	E-mail address: (to be us	sed for future annual report	notification)	- (5)	<u>-</u> ي	47
For further information	on concerning this matter, pleas	se call:			15 JUL -6 PH	4.7
MIGUEL A. PENAF	RANDA	786 at (	521-6933			
Name	of Contact Person		de & Daytime Telephone Numb	ber	~	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)			
Ma	iling Adduses	644	Adduses			

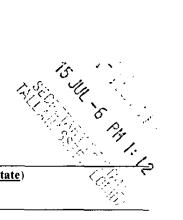
#### Mailing Address

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



AP AUTO BODY & DIAGNOSTIC INC.

( <u>Name o</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following	ing amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and con	ation "Corp," "Inc," or	ion." "company," or "incorporated" or the "Co". A professional corporation name must "P.A."	The new abbreviation t contain the
B. Enter new principal office address,	if applicable:	N/A	<del></del>
(Principal office address <u>MUST BE A S</u>	IKEET ADDKESS )		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		N/A	
). If amending the registered agent an new registered agent and/or the new			
Name of New Registered Agent	N/A		_
	(Florida s	treet address)	_
New Registered Office Address:	N/A	, Florida	
New Registered Agent's Signature, if ch	nanging Registered Agen	· ·	(Code)
		Registered Agent, if changing	<del>-</del>

## 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 Jon	<u>es</u>	
X Add	<u>sv</u>	Sally Smi	i <u>th</u>	
Type of Action (Check One)	<u>Title</u>	Ì	<u>Name</u>	<u>Addres</u> s
1) Change	VP		SEGUNDO A. PENARANDA	2867 SW 38TH AVENUE
X Add				MIAMI FL 33134
Remove				
2) Change				
Ađd				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	<del> </del>			
Add				
Remove				
6) Change		<del></del> -		
Add				
Remove				

E. If amending or addin (Attach additional shee	g additional Articl	es, enter change	(s) here:			
N/A	is, ij necessury).	(De specific)				
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			The state of the s			
F. If an amendment pro provisions for imple	vides for an excha	nge, reclassificat	tion, or cancellate	ion of issued sha	res,	
(if not applicable	, indicate N/A)	amene ii noc con				
N/A	•					
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	06/17/2015			
The date of each amendment date this document was signed.		, i	f other	than the
	06/17/2015			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
Note: If the date inserted in the document's effective date on the	this block does not meet the applicable statutory filing requirements, this date vote Department of State's records.	vill not	be liste	ed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )			
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.			
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):			
	cast for the amendment(s) was/were sufficient for approval			
by	(voting group)			
~, <u></u>	(voting group)			
action was not required.  The amendment(s) was/wer	re adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder			
action was not required.				
06/16. Dated	/2015 July			
Signature		<u>-</u>	귥	
(B	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)		JUL -6	Participant of the same of the
	MIGUEL A. PENARANDA		25	
	(Typed or printed name of person signing)	-		***
	PRESIDENT		~	
	(Title of person signing)			,