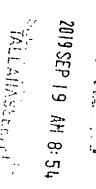
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C KILLDERY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: <u>ACCESS</u>	Towing and	1 Service inc
DOCUMENT NUMB	er: <u>P150000</u> 9°	7466	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this mat	ter to the following:	
-	Enock I	Name of Contact Person	1
-		Firm/ Company	
_	4686 Kirk	Rd	
-	Lake Worth	Address 1 F1 3346 City/ State and Zip Code	<u> </u>
	TrimnPretty & E-mail address: (to be us	O YCUNOO COM ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Ena:	C I. OWITI	at (<u>501</u> Area Co) 367 - 3358 de & Daytime Telephone Number
Enclosed is a check for	the following amount made p		
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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Access Towing and Service Inc.

	of Corporation as curre	ntly filed with the Florida Dept. of	State)		
P15000099466	(Document Number	r of Corporation (if known)	- .		
	(тосинен жинос	r of Corporation (II known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	nis <i>Florida Profit Corporation</i> adopt	s the following	g amendm	ent(s) to
A. If amending name, enter the new na	ame of the corporation:				
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa B. Enter new principal office address,	nation "Corp," "Inc," on tion," or the abbreviatio if applicable:	r "Co". A professional corporation			n
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)				
		, <u></u>			?
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4686 Kirk Rd	Lan	19 SEP	**************************************
		Lake Worth, FL 33461	ر ج ا	9	7
			r		177
D. If amending the registered agent an new registered agent and/or the new			f the	9:54	4 J
Name of New Registered Agent	Enock I Owiti				
<u> </u>	4686 Kirk Rd		·		
	(Florida	street address)			
New Registered Office Address:	Lake Worth	Flo	33461 orida		
		(City)	(Zip C	ode)	
New Registered Office Address: New Registered Agent's Signature, if e I hereby accept the appointment as regist	hanging Registered Age tered agent. I am familio	(City)	orida <u> </u>	ode)	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offic 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.

Framula:	ч, ана зану этин	, Sr as an Aaa.			
Example: <u>X</u> Change	PT John f	Doe			
X Remove	<u>V</u> <u>Mike</u> .	Mike Jones			
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	PD	Edward Berlovan	0323 Squivernud We		
Add Remove			Lake Worth FL 33467		
2) Change Add	PD_	Enock I. aviti	4686 Firk Rd Lake Worth FL		
Add Remove 3) Change Add		Jaion O. Owiti	33467 4686 KIVK Rd 1016 WOYHM FL		
Remove 4) Change Add Remove	<u>S</u>	Stacy Owiti	33461 4086 KIVK Rd Law Worth Fe 33461		
5) Change Add Remove					
6) Change Add Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
,	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	•
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this d document's effective date on the Department of State's records.	ate will not be listed as the
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.	(8)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"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.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 9 16 19 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 cou	
appointed fiduciary by that fiduciary)	
Enak I. Owiti	
(Typed or printed name of person signing)	
President Director	
(Title of person signing)	