

11/7/22, 1:47 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H22000380505 3)))



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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : WF TAXES AND MORE INC.
Account Number : I20200000043
Phone : (772)879-0010
Fax Number : (772)879-0150

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Wftaxes.office@gmail.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
PRISTINE LEASING COMPANY INC.**

Certificate of Status	1
Certified Copy	0
Page Count	06
Estimated Charge	\$43.75

A. RAMSEY
NOV 09 2022

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2022 NOV -8 AM 7:48

2022 NOV -8 PM 1:16

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11/8/2022 1:36:18 PM PAGE 1/001 Fax Server



November 8, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PRISTINE LEASING COMPANY INC.
3212 S US 1
FT PIERCE, FL 34982US

SUBJECT: PRISTINE LEASING COMPANY INC.
REF: P16000018062

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check only ONE box under adoption of amendment on the last page of the amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

FAX Aud. #: H22000380505
Letter Number: 822A00025057

Nov 08, 2022 15:35 (UIC-05)

From: +17722815520 (Walter Gomez)

To: +18506176380

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PRISTINE LEASING COMPANY INC.

DOCUMENT NUMBER: P16000018062

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NICHOLAS DELLA GROTTA

Name of Contact Person

PRISTINE LEASING COMPANY INC.

Firm/ Company

290 nieuport dr

Address

vero beach, FL 32968

City/ State and Zip Code

wftaxes.office@gmail.com

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

For further information concerning this matter, please call:

NICHOLAS DELLA GROTTA

at (954) 798-1123

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

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

PRISTINE LEASING COMPANY INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000018062

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

*(Principal office address **MUST BE A STREET ADDRESS**)*

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, If changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

6) Change _____
Add _____

Nov 08, 2022 15:35 (UTC-05)

From: +17722815520 (Walter Gomez)

To: +18506176380

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E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

[illegible]

F. 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: 11/07/2022, 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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

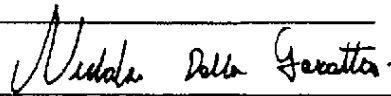
- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each 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)

Dated 11/07/2022

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 court appointed fiduciary by that fiduciary)

NICHOLAS DELLA GROTTA

(Typed or printed name of person signing)

PSTD

(Title of person signing)