P16000032794

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

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TO: Amendment Se Division of Cor		•		16 SEP
NAME OF CORPO	DRATION: FIRST CALL AU	TO GLASS CORP		
DOCUMENT NUM	1BER: P16000032794			9 6
	es of Amendment and fee are su	abmitted for filing.		
Please return all corr	respondence concerning this ma	atter to the following:		
	BARBARA GONZALEZ			
		Name of Contact Person	n	_
		Firm/ Company	the state of the s	-
	2129 DAVIE BLVD APT 13	31		_
		Address		
	FORT LAUDERDALE, FLO			
		City/ State and Zip Cod	e	
CO	OL17BLUE@AOL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	†
For further informati	on concerning this matter, pleas	se call:)
BARBARA GONZA	ALEZ	954 at (296-4515	ĺ
Name	e of Contact Person	Area Co	de & Daytime Telephone Numb	er ,
Enclosed is a check t	for 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)	\. <u>.</u>
	. *1* A . B	. .	A 3.4	

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

FIRST CALL AUTO GLASS CORP

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

P 16000032794		
(Docum	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation	adopts the following amendment
A. If amending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	," "Inc," or "Co". A professional corp	
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)	
D. If amending the registered agent and/or register new registered agent and/or the new registered		fame of the
Name of New Registered Agent	onice address.	
Nume of New Negisierea Ageni		<u> </u>
	(Florida street address)	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent.		ons of the position.
Signo	ature of New Registered Agent, if changin	<u> </u>

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.

X Change	<u>PT</u> <u>J</u>	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u> s	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	CHALU, YANELIS	2129 DAVIE BLVD APT 131
Add			FORT LAUDERDALE, FL. 33312
X Remove			
2) Change	PT	GONZALEZ, BARBARA	2129 DAVIE BLVD APT 131
X Add			FORT LAUDERDALE, FL 33312
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Demove			

	(Be specific)
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if an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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The date of each amendment(s) as date this document was signed.	doption:, i	f other than the
Effective date if applicable:		
Effective date in appareaute.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not epartment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
7/13/2016		
Dated		
(By a description of the control of	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	YANELIS CHALU	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	