Missida Repartment of State Division of Comporations Electronic Viling Cover Sheet

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To: Division of Corporations

Fax Number : (850)617-6380

From

Account Name : INDEPENDENT TAX SERVICES PLUS CORP.

Account Number : I20020000072 Phone : (305)887-0001

Fax Number : (305)884-6444

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

Fmail Address: Darts45al600rp@6mail.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN PARTS 4 SALES CORP

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JUN 2 1 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Ser Division of Cor					
NAME OF CORPO	PARTS 4 SALES	CORP			
	IBER: P17000000987				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	ALOINA ABRAHAM DIAZ	:			
	Name of Contact Person				
	Firm/ Company				
	17607 SW 146 TH AVE				
	Addresa				
	MIAMI FL 33177				
		City/ State and Zip Code			
	parts4salescorp@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, plea	se call:			
ALOINA ABRAHA	M DIAZ	at (⁷⁸⁶	474-5982		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
M	ailing Address	Street Address			
	nendment Section		ment Section		
	vision of Corporations		n of Corporations		
	D. Box 6327		entre of Tallahassee		
, Ta	llahassee, FL 32314	2415 I	N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment ion

	to	
•	Articles of Incorp	orati
	of	
PARTS 4 SALES CORP	•	
	(Name of Corporation as currently fl	ied w

ith the Florida Dept. of State) P17000000987 (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: 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) 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) (e), F.S.

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.

X Change	<u>PT</u> <u>John</u> 3	<u>Doe</u>	
X Remove	V Mike	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	NELSA MARIA DIAZ GILART	17607 SW 146 TH AVE
Add			MIAMI FL 33177
X Remove			
2) Change Add	~		
Remove 3) Change			
Add Remove			
4) Change Add			
Remove 5) Change			
Add Remove			
6) Change			
Add			
Remove			

	heets, if necessary).	(Be specific)			
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f an amendment j	provides for an excl	hange, reclassificat	ion, or cancellatio	on of issued shares,	
provisions for im	plementing the ame able, indicate N/A)	enament it not con	tained in the affici	iumem itseu:	
(ij noi appnea	,010, Iranowio 21122)				
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		<u> </u>	, - _v		
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The date of each amendment(s) a	06/18/2021 doption:		, if othe	er than the
date this document was signed.				
06/1 Effective date if applicable:	8/2021			
Effective date it apparente.	(no more than 90 days	after amendment file date)	-	~
Note: If the date inserted in this b document's effective date on the De		atutory filing requirements, this date will	not be lis	ited as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were add action was not required.	pted by the incorporators, or board o	f directors without shareholder action and	sharehold	er
☐ The amendment(s) was/were add by the shareholders was/were su		er of votes cast for the amendment(s)		
must be separately provided for	roved by the shareholders through vo each voting group entitled to vote set for the amendment(s) was/were suffi	, , , , , , , , , , , , , , , , , , , ,		
by		19	<u> </u>	1021 NUL 1802 AM
· · · · · · · · · · · · · · · · · · ·	(voting group)	*	ے جو	<u>س</u>
			LLAHASS	<u> </u>
06/18/2021			00 T	: 8
Dated			آرين َ	; p (
Signature	All and the second		<u>₽</u> .	1 0: F
(By a di selected	rector, president or other officer - if I, by an incorporator - if in the hands ed fiduciary by that fiduciary)		- <u>4</u>	1,1
	ALOINA ABRAHAM DIAZ			
	(Typed or printed name o	f person signing)		•
	PRESIDENT/DIRECTOR			
	(Title of person signing)			-