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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: EXECUTIVE MOTORS OF AVENTURA, INC. DOCUMENT NUMBER: P1700017 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANNALISA ANGELI Name of Contact Person W DIXIE HWY
Address NORTH MIAMI BEACH FL 33 180
City/ State and Zip Code <u>E-mail address: (to be used for future annual report notification)</u> For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

# **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 AVENTURA INC

EXECUTIVE MOTORS OF THEIR	NA, INC.
(Name of Corporation as currently	iled with the Florida Dept. of State)
(Name of Corporation as currently) P17000011971	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $Fl$ its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A SEC SE SE SEC SE SEC SE SEC SE SEC SE SEC SE SEC SE
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent N/A	
(Florida stree	t address)
New Registered Office Address: NA	Florida
New Registered Office Address. 11 11	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
N/A	
Signature of New Re	gistered Agent, if changing

' If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Che Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officer. 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 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 Chang 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 Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove	P	ROBERTO AVELLA	468 GOLDEN ISLES DE . APT. 201 HALLANDAUE BEACH FL 33
2) Change Add	_\_	MARIO TUNDISI FILHO	2750 NE 183 STREET APT. 1809
Remove 3 ) Change Add	T	ANNALISA ANGELI	AVENTURA FL 33160 468 GOLDEN ISLES DR APT 202
Remove 4) Change Add			HALLANDAN DEALH, FL3:
Remove 5) Change Add Remove			MII: 17  OF STATE OF STATE
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
OKINERSHIP AND PROFIT AND LOSS	
ROBERTO AVELLA 67% OF CORPORATE STOCKS AND	PROFIT AND LOS
MARIO TUNDISI FILHO 33% OF CORPORATE STOCKS AND	
	<del></del>
	<del></del>
	Zs _
	-6
	FII AUG 2:
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:	SET SE M
(if not applicable, indicate N/A)	E D
	3
	<del>.</del>

The date of each amendment(s) adoption:, if other	r than
date this document was signed.	
Effective date if applicable:	_
. (no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lis document's effective date on the Department of State's records.	ted as
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
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	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 08/16/2019  ALL ALL ALL ALL ALL ALL ALL ALL ALL AL	Τį
Signature (By a director, president or other officer – if directors or officers have not been (1)	
selected by an incorporator – if in the hands of a receiver, trustee, or other court	Π
appointed fiduciary by that fiduciary)	כ
MARIO TUNOISI FUHO	
MARIO IUNAISI FILHO 577 (Typed or printed name of person signing)	_
(Typed of printed name of person signing)	
PRESIDENT	
(Title of person signing)	