

P17000019409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

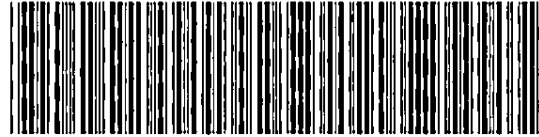
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2022 JUN 13 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FL

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2022 JUN 13 AM 9:20

ALLAHASSEE, FL

A. BUTLER

JUN 13 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Signature Auto Group Inc
DOCUMENT NUMBER: P17000019409

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

Please return all correspondence concerning this matter to the following:

IGNACIO MEJIA
Name of Contact Person
1949 NE 148TH ST
Firm/ Company
Address
NORTH MIAMI, FL 33181
City/ State and Zip Code
INFO@FASTLIFEAUTO.MIAMIG
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IGNACIO MEJIA at (305) 321-6680
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:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|---|---|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation

Signature Auto Group Inc

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

P17000019409

(Document Number of Corporation (if known))

FILED

2022 JUN 13 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FL

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:

FASTLIFE AUTO GROUP INC

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)

1949 148TH ST

NORTH MIAMI, FL 33181

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1949 148TH ST

NORTH MIAMI, FL 33181

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

IGNACIO MEJIA

1949 NE 148TH ST

(Florida street address)

New Registered Office Address:

NORTH MIAMI

(City)

Florida

33181

(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.

Ignacio Mejia

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.

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.

Example:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
-----------------	-----------	-----------------

<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
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<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>
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Type of Action
(Check One)

Title

Name

Address

1) _____ Change

P

IGNACIO Mejia

1949 NE 148th ST
North Miami, FL 33181

~~X~~ Add

Remove

2) Change

P

Gerard Bautista

4701 SW 45TH ST
BLDG 12 BAY 31
DAVIE, FL 33314

 Add

X Remove

3) Change

[illegible]

 Add

 Remove

4) Change

_____ Add

Remove

5) _____ Change

 Add

Remove

6) Change

Add

Remove

(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

Z/A

The date of each amendment(s) adoption: 01/01/2022, 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 06/13/2022

Signature Ignacio Mejia
(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)

Ignacio Mejia
(Typed or printed name of person signing)

President
(Title of person signing)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2022 JUN 13 AM 10:03

SECRETARY OF STATE
TALLAHASSEE, FL

700389428127
06/13/22--01005--001 **1402.50

DOCUMENT # **P170000019409**
1. Corporation Name
signature auto group inc

2. Principal Office Address - No P.O. Box # 1949 148TH ST		3. Mailing Office Address 1949 NE 148TH ST	
Suite, Apt. #, etc		Suite, Apt. #, etc	
City & State NORTH MIAMI, FL		City & State North Miami, FL	
Zip 33181	Country USA	Zip 33181	Country USA

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name **IGNACIO MEJIA**
Street Address (P.O. Box Number is Not Acceptable) **1949 NE 148TH ST**
Suite, Apt. #, Etc
City **NORTH MIAMI** State **FL** Zip Code **33181**

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent **IGNACIO MEJIA** Date **06/13/2022**
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	IGNACIO MEJIA	1949 NE 148TH ST	North Miami, FL 33181

10. E-mail Address: **INFO @ FASTLIFEAUTO.MIAMI**

(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: **IGNACIO MEJIA** **06/13/2022** **(305) 216-668**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #