P170000 35363

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COVER LETTER

, TO: Amendment Section

Division of Corporations

NAME (AF COADD)	DRATION: LAS MERCEDES	CAR WASH INC		
DOCUMENT NUM	D17000035363			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	ANAKARLA REYTOR			
		Name of Contact Person)	
	MIAMI LEGAL USA			
		Firm/ Company	·	
	5167 SW 8 ST			
		Address		
CORAL GABLES FL 33134				
		City/ State and Zip Cod	e	
\$ 17	AAHEESTATIOA/SZIATAH ///			
N117	AMILEGALUSA@GMAIL.CO			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
ANAKARLA REY	FOR	305 at (456-4547	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	urtment of State:	
S35 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>M</u>	ailing Address	Street	Address	
	nendment Section	Amendment Section		
	vision of Corporations O. Box 6327	Division of Corporations Clifton Building		
P.O. Box 6327 Tallahassee, FL 32314			Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

LAS	MERG	EDES (`AR W	/ASH IN	ί.
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(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State	1
P17000035363			
·	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the f	ollowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
FLORIDA CAR WASH INC			The new
	uation "Corp," "Inc," or	ion," "company," or "incorporated" of "Co". A professional corporation name "P.A."	the abbreviation
B. Enter new principal office address.	if applicable:	16850 SW 141 CT	
	B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
			,
			<i>:</i>
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)		SAME AS ABOVE	
· · · · · · · · · · · · · · · · · · ·	 		
			
D. If amending the registered agent ar			1.7
new registered agent and/or the ne		<u>88:</u>	
Name of New Registered Agent	ANAKARLA REYTOR		
	5167 SW 8 ST		
	(Florida)	treet address)	
New Registered Office Address:	CORAL GABLES 33		3134
		(City)	(Zip Code)
New Registered Agent's Signature, if c		<u>nt:</u> with and accept the obligations of the y	cition
therety accept the approximent as regime			ALLICON,
		/ // 1/	
	1416		
	Signature of New	Registered Agent, if changing	
		/	

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: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add	 _		
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
		
		
	 	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.	
provisions for implementing the ame (if not applicable, indicate NoA)	endment if not contained in the amendment itself:	

The date of each amendment(s) adoption date this document was signed.	:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departmen	bes not meet the applicable statutory filing requirements, not of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes east for the amend for approval.	lment(s)
	by the shareholders through voting groups. The following so ting group entitled to vote separately on the amendment(s	
	amendment(s) was/were sufficient for approval	
by	tvoting group)	
	(voting group)	
	the board of directors without shareholder action and shareholder action action and shareholder action	eholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and sharehol	der
10/24/2019 Dated		
selected, by an	president or other officer – if directors or officers have not incorporator – if in the hands of a receiver, trustee, or othe ciary by that fiduciary)	
YUSIE	EL SILVA	
	(Typed or printed name of person signing)	
PRESH	DENT	
	(Title of person signing)	