P170000 35973

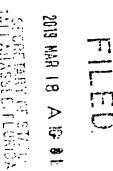
(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(D	Ocument Number)	
Certified Copies	Certificate:	s of Status
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MAR 27 2019 XUBIMBLI T



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: KARS BODY SHO	P INC	
DOCUMENT NUMI	P17000035973		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mate	ter to the following:	
	STEVE LEWIS		
	LCG TAXSHOP INC	Name of Contact Person	1
		Firm/ Company	
	10829 NW 27 AVE		
		Address	
	MIAMI, FL. 33167		
		City/ State and Zip Cod	e e
LCG	TAXSHOP@ATT.NET		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
305 769 9333		305	769-9333
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	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)
Am Div P.C	endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Ameno Divisio Cliftor 2661 E	Address Innent Section on of Corporations n Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED.

KARS BODY SHOP INC

2019 MAR 18 A 8 8 F

	2012 WILL 10 14 W 31			
(Name of Corporation as curren	tly filed with the Florida Dept; of State) progression			
P17000035973	(Name of Corporation as currently filed with the Florida Dept; of State) RY OF STATE TALLAHASSEE, FLURIDA			
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607.1006. Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation:				
JARRETS AUTO SALES & PARTS CORP	a.,			
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the			
B. Enter new principal office address, if applicable:	4651 SW 51 STREET SUITE 809			
(Principal office address MUST BE A STREET ADDRESS)	DAVIE, FL. 33314			
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 ad- new registered agent and/or the new registered office addre	dress in Florida, enter the name of the			
Name of New Registered Agent				
(Florida s	treet address)			
New Registered Office Address:	, Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.			
Signature of New	Registered Agent, if changing			

Page 1 of 4

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>Jo</u>	hn Doe	
$\frac{X}{X}$ Remove $\frac{X}{X}$ Add		ike Jones nlly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	CRAIG A. GRANT	8200 SW 3RD STREET
Add			NORTH LAUD, FL.33068
X Remove			
2) Change			
Add			
Remove			<u>-</u>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets,	if necessary).	cles, enter chan (Be specific)				
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<u>f an amendment provi</u>						
provisions for impleme		ndment if not co	ontained in the :	<u>imendment itsel</u>	<u>f:</u>	
(if not applicable, i	ndicate N/A)					
		_				
					_	
	 -	<u> </u>				
	<u> </u>					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after ame	ndment file date)
Note: If the date inserted in this block does not meet the applicable statutory fidocument's effective date on the Department of State's records.	ling requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	s cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groumust be separately provided for each voting group entitled to vote separately of	
"The number of votes cast for the amendment(s) was/were sufficient for a	pproval
by	,••
(voting group)	
■ The amendment(s) was/were adopted by the board of directors without shareho action was not required.	lder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	action and shareholder
03/14/2019 Dated	
Signature	
(By a director, president or other officer - if directors	or officers have not been
selected by an incorporator – if in the hands of a rece appointed fiduciary by that fiduciary)	iver, trustee, or other court
ORVILLE JARRETT	
(Typed or printed name of person s	igning)
PRESIDENT	
(Title of person signing	2)

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