

P17000038347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

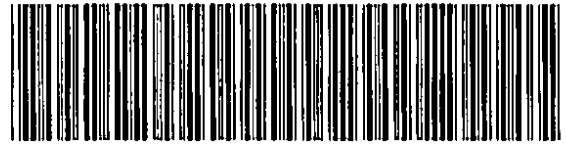
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/23/18--01035--012 **35.00

SEP 05 2018
TALLAHASSEE, FLORIDA

18 SEP -4 AM 10:28

FILED

SEP 05 2018

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 25, 2018

ALVIN MITCHENER
ALL COUNTY AUTO, INC
2401 NW 19TH STREET
FT LAUDERDALE, FL 33311

SUBJECT: ALL COUNTY AUTO, INC
Ref. Number: P17000038347

We have received your document for ALL COUNTY AUTO, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 018A00015316

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALL COUNTY AUTO, INC

DOCUMENT NUMBER: P17000038347

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

Please return all correspondence concerning this matter to the following:

ALVIN MITCHENER
Name of Contact Person

allcountyauto@aol.com
Firm/ Company

2401 N.W. 19TH STREET
Address

FORT LAUDERDALE FLA. 33311
City/ State and Zip Code

allcountyauto@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALVIN MITCHENER at (954) 274-6948
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 checked="" 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 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Incorporation
of

ALL COUNTY HOTEL, INC.

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

D7000 38377

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following 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 "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must 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)

P.O. Box 59056,
FORT LAUDERDALE
FLORIDA 33350

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

ALVIN C. MITCHENER

6678 CONCH COURT

P.O. Box NOT acceptable

11.

New Registered Office Address:

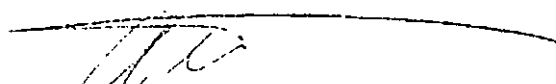
BOYNTON BEACH, FLORIDA 33437

(City)

(2

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.



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 Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>Change</u>	<u>PRES</u>	<u>MICHAEL V. DALY</u>	<u>5402 SW 1</u>
<u>Add</u>			<u>PLANTATION</u>
<u>X</u> Remove			<u>FLORIDA</u>
2) <u>Change</u>	<u>PRES</u>	<u>ALVIN C MITCHELL</u>	<u>6678 CON</u>
<u>X</u> Add			<u>BOYNTON</u>
<u>Remove</u>			<u>FLORIDA</u>
3) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
4) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
5) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			

or, amending or adding additional terms, such change(s) here:

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

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:

(if not applicable, indicate N/A)

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 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 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)

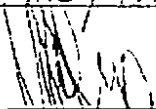
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

03/24/18

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 receiver, trustee, or other court appointed fiduciary by that fiduciary)

MICHAEL V. DALY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)



ALL COUNTY AUTO, INC

2401 NW 19 STREET, FT. LAUDERDALE, FL 33311
Phone 954-616-8206
allcountyautodeals@gmail.com

On May 18th, 2018 the Board of Directors of All County Auto, Inc had a meeting which lasted for 1 hour and 14 minutes. At that time the following changes were implemented, to wit:

Michael V. Daly resigned the role as President and Alvin Mitchener was appointed President.

Please see attached supporting documents.

Respectfully Yours,



Michael V. Daly