## P11000042352

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ULMERTON A	UTO AND TIRE, INC.
DOCUMENT NUMBER: P17000042352	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	natter to the following:
TAREQ MIHYAR	
ULMERTON AUTO & T	Name of Contact Person RE, INC.
9485 ULMERTON ROAD	Firm/ Company
LARGO, FL 33771	Address
-	City/ State and Zip Code
tareq@ulmertonautoandtire.com	<b>\</b>
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	 ease call: 
Tareq Mihyar	at () 657-6544
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	  e payable to the Florida Department of State: 
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	11
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

ULMERTON AUTO & TIRE, INC.

OLNIERTON ACTO & TIKE, INC.			AL.	~	~
(Name of Cor	poration as currently	filed with the Florida Dept. of State)	18 /s.	1	_
P17000042352		_	د رو مراجع	64 	<b>1</b>
(	Document Number of (	Corporation (if known)			_
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	 Florida Statutes, this <i>Fi</i> 	lorida Profit Corporation adopts the follo	wing amen	dment(s)	to
A. If amending name, enter the new name of	the corporation:				
ULMERTON AUTO AND TIRE, INC.			The	new	
name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"			ne abbrevia	tion	
B. Enter new principal office address, if app	 licable:	9485 ULMERTON ROAD			
(Principal office address <u>MUST BE A STREE</u>		LARGO, FL 33771		_	
			<del></del>	_	
				_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)				_	
				_	
				_	
D. If amending the registered agent and/or r		ss in Florida, enter the name of the			
new registered agent and/or the new regis	stered office address:				
Name of New Registered Agent	<u> </u>				
	(Florida stree	t address)			
New Registered Office Address:		, Florida			
	(0	City)	(Zip Code)		
N. D. Jan J. A. L. Sin J. Sin	 				
New Registered Agent's Signature, if changing the language of the Agent's Properties of the Registered at the Registered Agent's Signature, if changing the Registered Agent's Signature, if the Registered	gent. I am familiar wi	th and accept the obligations of the positi	ion.		
	Si	if the second of the second			
	Signature of New Res	gistered Agent, if changing			
	II .				

Executive Officer; CFC held. President, Treasur Changes should be note	e Presiden ) = Chief rer, Direct ed in the fe eaves the c	nt: T= Treasura Financial Offic- tor would be P ollowing manne corporation, Sa	er; S= Secretary; D= Director; cer. If an officer/director holds FD. er. Currently John Doe is listed thy Smith is named the V and S.	TR= Trustee: C = Chairman or Clerk: CEO = Chief more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should he noted as John Doe, PT as a Change,
Example:	ve, ana sa		ы ил диц.	
X Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Nar</u>	n <u>e</u>	<u>Addres</u> s
1) Change	VP	MC	HAMMED H. LOULIDI	9485 ULMERTON ROAD
Add				LARGO, FL 33771
X Remove				
2. (1)				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change		<del>_</del>		
Add			1	
Remove				
51 Change				_
Add				
Remove				
6) Change				_
Add				
Remove				

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)

E. If amending or adding additional Artic	
(Attach additional sheets, if necessary).	(B'e specific)
-	
, <u>, , , , , , , , , , , , , , , , , , </u>	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
Tale Hilly AR	2 /10 7. Shaor
Talto MIHYAR	1 10070 Shales
<u> </u>	
<u> </u>	

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 does redocument's effective date on the Department of	to meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CF	IECK ONE)
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the amendment(s) approval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	indment(s) was/were sufficient for approval
by	ting group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated Aug. 29,	2017
Signature —	
(By a director, pres	orporator – if in the hands of a receiver, trustee, or other court
7	REFO MIHYAR
	(Typed or printed name of person signing)
	Pessident
	(Title of person signing)