## P17000046624

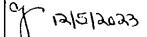
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: AJV Motors Comp	oany INC	
DOCUMENT NUM			
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Victor Shubin		
	<del></del>	Name of Contact Person	n
	AJV Motors Company INC		
		Firm/ Company	<del></del>
	5519 Rio Grande Ave	, ,	
		Address	
	Jacksonville FL 32254		
		City/ State and Zip Cod	· ·
	722-1469@gmail.com		
		sed for future annual report	notification)
For further informati Victor Shubin	on concerning this matter, plea	se call; at (904	_) 3022207
Name	of Contact Person	at (ar Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

( <u>Name</u>	of Corporation as currently filed with the Florida Dept of State 7 Fil 5: (	09 -
<del>01-11-</del>	P17000046624 .	
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 60' as Articles of Incorporation:	7.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following ame	endment(
A. If amending name, enter the new	name of the corporation:	
	<del></del>	new
	in the word "corporation," "company," or "incorporated" or the abbreviation "Co Corp," "Inc," or "Co". A professional corporation name must contain the " or the abbreviation "P.A,"	
B. Enter new principal office address Principal office address <u>MUST BE A.</u>		
		_
C. Enter new mailing address, if app (Mailing address MAY BE A POST		
· · · · · · · · · · · · · · · · · · ·	<del></del>	
		<del>_</del>
N 16		
new registered agent and/or the no	nd/or registered office address in Florida, enter the name of the w registered office address:	
Name of New Registered Agen		
	(Florida street address)	
New Registered Office Address		
	(City) (Zip Code)	
ew Registered Agent's Signature, if		
hereby accept the appointment as regi	stered agent. I am familiar with and accept the obligations of the position.	
	Signature of New Registered Agent, if changing	

## Check if applicable

**≡** The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

Example:

Please note the officer/director title by the first letter of the office title:

P = Rresident; 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>John L</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u> .	Jones .	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	C	Sergey Tokarev	1619 Hammock Grove Ln
XAdd			Jacksonville FL 32225
Remove			
2) Change	C	Lyudmila Land	8806 10th Ave
<u>X</u> Add			Jacksonville FL 32208
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

f 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)		(Be specific)
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		
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(у пот аррисате, такае м/л)	published for implementations	endment if not contained in the amendment itself:
	of the state of th	
	(if not applicable, indicate N/A)	
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	(if not applicable, indicate N/A)	

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The date of each amendment(s	11.09.2023 ) adoption: , if other than
date this document was signed.	· · · · · · · · · · · · · · · · · · ·
Effective date <u>if applicable</u> : _	
•	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by	
, — <u>——</u> —	(voting group)
11.09.20 Dated	23
Signature <u></u>	
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Victor Shubin
	(Typed or printed name of person signing)
	President
	(Title of person signing)