P17000056078

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Olty/Otate/Zip/Filone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
J. HORNE		
JAN 2 7 2022		

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2022 JAN - 7 PM 12: 52 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Wheels Plus & pluz Corp							
DOCUMENT NUM	BER: P17000056078						
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all corre	espondence concerning this ma	tter to the following:					
	Jose F Nino						
	Name of Contact Person						
	Wheels Plus & plus Corp						
	Firm/ Company						
	10090 Intercom Dr Unit B10						
	Address						
	Fort Myers, Fl. 33913						
		City/ State and Zip Code	2				
	wheelsplusplus@gmail.com						
	E-mail address: (to be us	sed for future annual report	notification)				
For further information	on concerning this matter, pleas	se call:					
Jose F Nino		94] at (4675053				
Name of Contact Person		\	de & Daytime Telephone Number				
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:				
S35 Filing Fee	■\$43,75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314		Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303				

Articles of Amendment to

Articles of Incorporation of

FILED

Wheels Plus & Plus Corporation

(Name of Corporation as currently filed with the Florida Dept. of State) P17000056078 (Document Number of Corporation (if known Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

N/A			The ne
name must he distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or	"Co". A professional corp	porated" or the abbreviation "Corp.,
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A ST</u>		<u>N/A</u>	
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> (N/A	
D. If amending the registered agent an new registered agent and/or the new			er the name of the
Name of New Registered Agent	N/A		
	N/A	Florida street address)	
New Registered Office Address:			, Florida
<u></u>		(City)	(Zip Code)

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.

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)

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	PT			
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change	<u>v</u>	Maria M	Nino	10090 Intercom Dr Unit B10 Fort
Add				
X Remove 2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change Add				
Remove				
51 Change				
Add Remove				
6) Change				
Add				
Remove				

	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
N/A	
	
. <u>If ar</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:
<u> </u>	(if not applicable, indicate N/A)
//A	

The date of each amendment(s) adoption:date this document was signed.	, if other than
Effective date if applicable:	
(no more than 90 de	tys after amendment file date)
Note: If the date inserted in this block does not meet the applicabl document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or boa action was not required.	rd of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The nuby the shareholders was/were sufficient for approval.	imber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot	* * · · · · · · · · · · · · · · · · · ·
"The number of votes cast for the amendment(s) was/were s	sufficient for approval
by(voting group)	
01/04/2022 DatedSignature	
(By a director, president or other officer selected, by an incorporator – if in the happointed fiduciary by that fiduciary)	
Jose F. Nino	
(Typed or printed nan	ne of person signing)
President.	
(Title of person signi	ng)

the

the