P170000 58471

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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MOREJON REPA	IRS INC	
DOCUMENT NUM	P17000058471		<u></u>
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	PEDRO MOREJON		
		Name of Contact Person	
	MOREJON REPAIRS INC		
		Firm/ Company	
	15650 SE 92ND CT		
		Address	
	SUMMERFIELD, FL 34491		
		City/ State and Zip Code	<u> </u>
	info@ocalataxservice.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
PEDRO MOREJON		305) 216-9458 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 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

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MOREJON REPAIRS INC		
(Name of Corporation as current)	y filed with the Florida Dept. of State)	
P17000058471		
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	ig amendment(s)
A. If amending name, enter the new name of the corporation:		
		_The new
name must be distinguishable and contain the word "corporation," "or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", a "chartered," "professional association," or the abbreviation "P.A."	1 professional corporation name must conta	on "Corp" in the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		~~2
)20
		
C. Enter new mailing address, if applicable:		: Jul 23
(Mailing address MAY BE A POST OFFICE BOX)		
		AMIO: 2
		<u></u>
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the	C.
new registered agent and/or the new registered office address	<u> </u>	
Name of New Registered Agent		_
	reet address)	_
(Piorida so	reet adaress)	
New Registered Office Address:	, Florida	Code)
	(City) (Zip	Coae)
New Registered Agent's Signature, if changing Registered Agent Thereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.	
		_
Signature of New F	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:

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	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Roberto C. Garcia Miranda	15650 SE 92nd CT
X Add			Summerfield, FL 34491
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	dding addition sheets, if neces	ssary). (Be :	specific)				
							
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f an amendmer	it provides for	' an exchange the amendme	, reclassifica ent if not con	tained in the	amendment it	tself:	
provisions for i (if not apple	icable, indicate	· N/A)	M II HOL COL	***************************************			
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The date of each amendment() date this document was signed.	s) adoption:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
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/we	adopted by the shareholders. The number of votes cast for the amendner sufficient for approval.	nent(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following stall for each witing group entitled to vote separately on the amendment(s):	itement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
·	(voting group)	
07/18/ Dated	2020	
se	y a director, president or other officer – if directors or officers have not lected, by an incorporator – if in the hands of a receiver, trustee, or other pointed fiduciary by that fiduciary)	een court
	PEDRO MOREJON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

the