P17000072421

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2022 APR -7 PM 12: 15
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	S:PIT STOP AL	UTOMOTIVE INC		
DOCUMENT NUMBER:	P17000072421			
The enclosed Articles of Amer	adment and fee are su	bniitted for filing.		
Please return all corresponden	ce concerning this ma	tter to the followi	ոց։	
	VIC	TOR M PAGAN		
		Name of Cont	act Persor	
	QUALITY FINANCIAL AND TAX SERVICES			ERVICES
	Firm/ Company			······································
	1807 CASTLETON DR			
	Address			
	SAINT CLOUD, FL. 34771			
		City/ State and	l Zip Code	:
	qua	alityfınancialtax@g	mail.com	
E-1	nail address: (to be us	sed for future annu	ual report	notification)
For further information concer	-		407	, 218-1566
Name of Contact Person		at 1	Area Coo	
Enclosed is a check for the fol	lowing amount made			
-	\$43.75 Filing Fee & Tertificate of Status	S43.75 Filing Certified Cop (Additional ed enclosed)	οy.	☐\$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 Co 2415 N	Address ment Section n of Corporations entre of Tallahassee 4. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment Articles of Incorporation

FILED

2022 APR -7 PM 12: 15

	PIT STOP AUTOMITIVE INC	SECRETARY OF STATE
(Name of C	Corporation as currently filed with the FI	orida Dept. A State HASSEE, FL
	P17000072421	
	(Document Number of Corporation (if k)	iown)
Pursuant to the provisions of section 607,100 its Articles of Incorporation:	06. Florida Statutes, this <i>Florida Profit Cor</i>	poration adopts the following amendment(s)
A. If amending name, enter the new name	of the corporation:	
		The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp- chartered," "professional association," or)," "bic," or "Co". A professional cor,	
B. Enter new principal office address, if a	pplicable:	
(Principal office address MUST BE A STR)		
C. Enter new mailing address, if applicab	ale:	
(Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o	ir registered offic <u>e address in Flor</u> id <u>a, en</u>	ter the name of the
new registered agent and/or the new re	egistered office address:	
Name of New Registered Agent	MIGUEL A AMEZQUITA	
	DOZZE GOLONIAL DD	.
_	9677 E COLONIAL DR (Florida street address)	
	ORLANDO	22817
New Registered Office Address:	(Circ)	Florida 32817 Zip Coder
	• •••	
New Registered Agent's Signature, if chan	iging Registered Agent:	
I hereby accept the appointment as registered	d agent. I am jamiliar with and accept the	obligations of the position,
	7	
——A	Signature of New Registered Agent, if	z hanaina
	organisa o to treat regulered rigent, p	s ministrate
Check if applicable	Z07.0120.0134.0.50	
☐ The amendment(s) is/are being filed pursu	uant to s. 607,0120 (11) (c), 1/.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:

tAttach additional sheets, if necessary)

Example:

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	\underline{sv}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change	PRES	LUIS O VEGA	9677 E COLONIAL DR
Add			ORLANDO, FL. 32817
X_Remove			
2) Change	VP	PEDRO O ROSADO CARRION	9677 E COLONIAL DR
Add			ORLANDO, FL. 32817
X Remove	RA_	LUIS O VEGA	9677 E COLONIAL DR
Add			ORLANDO, FL. 32817
X Remove			
4) Change	PRES	MIGUEL A AMEZQUITA	9677 E COLONIAL DR
_X Add			ORRLANDO, FL. 32817
Remove			
5) Change	RA	MIGUEL A AMEZOUITA	9677 E COLONIAL DR
X Add			ORLANDO, FL. 32817
Remove			
6) Change			
Add			
Remove			

	(Be specific)
·	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares.
rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) ado late this document was signed.	ption:	, if other than the
Ť		
Effective date <u>if applicable</u> :	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this bloof focument's effective date on the Depa	ck does not meet the applicable statutory filing outment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
X The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors with	nout shareholder action and shareholder
The amendment(s) was/were adopt by the shareholders was/were suff	red by the shareholders. The number of votes cas icient for approval.	for the amendment(s)
	oved by the shareholders through voting groups. It	
"The number of votes east to	r the amendment(s) was/were sufficient for appre	val
by		
	(voting group)	
DatedAPRIL 1	. 2022	
Signature /	Jr. C.	
(By a dire selected.	etor, president or other officer – if directors or of by an incorporator – if in the hands of a receiver. I fiduciary by that fiduciary)	
	MIGUEL ANGEL AMEZQUITA	
	(Typed or printed name of person signir	g)
	PRES / RA	
	(Title of person signing)	