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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Amend

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COVER LETTER . .

Division of Corpor	rations				
NAME OF CORPOR	ATION: ROAD (RAGE CUST	toms. IK		
DOCUMENT NUMB	er: <u>P/8000</u>	000847			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this ma	tter to the following:			
	FRANK	< MEADE	E		
-	0	Name of Contact Perso	n		
_	ROAD RI	AGE CUSTO	MS. ING		
	11000	Firm/ Company			
	118 KATP	RUN LA			
_		Address			
	GENSACOM	72 375	06		
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For further information	concerning this matter, plea	se call:		G 5	
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TRANK N	1EALE	at (850	<u> 329 - 743</u>	5 5	. 15
Name o	f Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment of State:	 ယ Մ	98.44 81.44
□ \$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)	51	ION?

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)
ROAD RAGE GUSTOMS, INC P1800000847
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp" "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) ROAD RAGE CUSTOMS, INC. 118 KATHRYN DRIVE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Paysacola FL 32506 Paysacola FL 32506
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent FRANK MEARING TO THE STATE OF THE STATE O
New Registered Office Address: JOBACOVA Florida 52506 755 755 755 755 755 755 755 755 755 75
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

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.

Example: X Change	PT John D	loc		
X Remove	V Mike Jones			
X Add	SV Sally S	<u>Smith</u>		
Type of Action (Check One)	<u>T</u> itle	Name	Address	
	$T_{i}e_{i}q_{i}$	DAWN M PHIL	106 KATHAYN DR BUSALOLA FL 32506	
Add		V	BUSALOLA FL 32506	
Remove		-		
2) Change	T, 8, 94.	FRANK MEACE	118 KATHRYN DR BUSACOLA FL 32506	
Add			SENSACOLA FL 32506	
Remove 3) Change			**********	
Add				
Remove				
4) Change			<u></u>	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
		Page 2 of 4		
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				

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E 10		
F. If an amendment provides for an expressions for implementing the accordance (if not applicable, indicate N/A)	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:	
provisions for implementing the a	mendment if not contained in the amendment itself:	
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provisions for implementing the a (if not applicable, indicate N/A)	Page 3 of 4	, if other than th

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficien	by the shareholders. In the shareholders.	The number of votes cast for the amendment(s)
		through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes east for the	e amendment(s) was	s/were sufficient for approval
by		"
,	(voting group)	
☐ The amendment(s) was/were adopted baction was not required.	by the board of direc	ctors without shareholder action and shareholder
Dated 12/12 Signature (By a director selected, by a appointed fid	president or other in incorporator – if in uciary by that fiduc	without shareholder action and shareholder officer – if directors or officers have not been in the hands of a receiver, trustee, or other court liary) MEANCE inted name of person signing)