P18000013016

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TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: DOWN DOCUMENT NUMBER: P180000	13016 Fuelpresso, luc. 35 5
The enclosed Articles of Amendment and fee are sub-	
Please return all correspondence concerning this matter	er to the following:
Donuts a 849 Mon Apopka,	MAVROV Name of Contact Person Md Fuel PPESSO, luc. Firm/Company JROE OVE Address FL 32703 City/ State and Zip Code O YAHOO. COM If for future annual report notification)
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
BILYAVA MAVROV Name of Contact Person	at (<u>386</u>) <u>383 – 00 3 D</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
\$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

		to	9 ,
	Articles of	Incorporation	
	, -	of	
2tu46(1	and tw	elpeesso, Inc.	
(Name o	f Corporation as curr	ently filed with the Florida Dej	ot. of State)
·	P180000	0 130 16	Ma. All
	(Document Numbe	er of Corporation (if known)	1990 B
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, t	this Florida Profit Corporation :	adopts the following amendment(s) to
A. If amending name, enter the new na	ime of the corporation	<u>:</u>	
Double and	POOL FERR	ESSO, IMC.	<i>Tt.</i>
(ERFERENCE EN	AND THE PERSON NAMED IN		The newThe new
SIESTHER ISTO, CIETARE	HERE HERE HE SHOWN	PRICE of professional corpo	ration name must contain the
HAND MAY PERSON IN SERVICE BEING			
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	<u>ikeetadukess</u>)		
			
C. Enter new mailing address, if appli			
(Mailing address <u>MAY BE A POST</u>)	<u> FFRCE BOA</u>)		
			
D. If amending the registered agent an	dar rouistared office :	addraws in Florida, antar the no	uma af tha
new registered agent and/or the new			ane in the
	0 .		
Name of New Registered Agent	province	MAVROV	
		De ave Apopka	FL 32703
New Registered Office Address:			, Florida
Hen Registered Office Againsts.		(City)	(Zip Code)
		• •	, , , , , , , , , , , , , , , , , , , ,
	ar mis zenski av parti te encav af	LEGISTOR)	
Thereby accept the appointment as regist			one of the position
т негеоу иссерь те арронитель их гедзы	trea agemi. Trainityaina	iji wiji ana accepi ine innigano	нь ну ние розинон.
		The second second	
	Signatury of Ne	Megistered Agent, if changing	
	V	//	
	ί	//	

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	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	BRANINGE MAURON	849 Morroe ave
X Add			Apopka FL 32703
Remove			
2) Change	VP	Albert Peneva	3346 CATERINA drive
Add			New SmyRNA
Remove			FL 32 168
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
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6) Change			
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provisions	for implement applicable, inc	iting the ame	ndment if	not contai	ined in the	a mendmen	t itself:	_	
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The date of each amendment(s) adoption: 02 /19 / 20 date this document was signed.	, if other than the
Effective date if applicable: 0 1 01 2019 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature # ## Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Bilyana Mavrov (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
president	
(Title of percen cigning)	