## P13000015023

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SECHLTARY OF STATE ALLAHASSEE, FLORIDA TILTU

T. LEAUELY



## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: TITO'S TIRES, IS	NC.				
DOCUMENT NUMBER: P18000015023					
The enclosed Articles of Amendment and fee are s	submitted for filing.				
Please return all correspondence concerning this m	atter to the following:				
Christopher O. Marsh					
	Name of Contact Person				
Taxpro of Florida					
<u> </u>	Firm/ Company				
9534 Navarre Parkway	·				
	Address				
Navarre FL 32566					
	City/ State and Zip Code				
chris@taxprofl.com					
E-mail address: (to be	used for future annual report notification)				
For further information concerning this matter, plea	ase call:				
Christopher O. Marsh	at () <u>863-4829</u>				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made	e payable to the Florida Department of State:				
■ \$35 Filing Fee	☐\$43.75 Filing Fee & ☐\$52.50 Fiting Fee Certified Copy (Additional copy is enclosed) ☐\$52.50 Fiting Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of

TITO'S TIRES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P18000015023 (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: A. If amending name, enter the new name of the corporation: 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 <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) , Florida New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: 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 positions. 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	TRISTAN, PABLO	35 Miracle Dr
Add			Mary Esther FL 32569
x Remove			
2) Change	VPD	BERGSCHNEIDER, FRANCISCA	332 GARDNER DR NE
x Add			Fort Walton Beach FL 32548
Remove			
3) Change			····
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending</u>	or adding additional Art	cles, enter chang	e(s) here:			
(Attach addi	ional sheets, if necessary).	(Be specific)				
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. If an ameno provisions	lment provides for an excl for implementing the ame	ndment if not co	ation, or cancella ntained in the an	<u>ition of issued sna</u> iendment itself:	ires,	
(if not	applicable, indicate N/A)		_			
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	tement
"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 shareh action was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required.	r
Dated	
Signature	
Signature  (By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Valentin Tristan, Jr.	
(Typed or printed name of person signing)	
President	
(Title of person signing)	