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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: A & R MIAMI TOWING INC DOCUMENT NUMBER: P18000039955 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAUL PABLO COLON Name of Contact Person A & R MIAMI TOWING INC Firm/ Company 7740 NW 8TH AVE Address MIAMI, FL 33150 City/ State and Zip Code angelhernandez56@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 764 - 4121 Area Code & Daytime Telephone Number RAUL PABLO COLON Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A & R MIAMI TOWING INC	<u> </u>
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P18000039955	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the co	orporation:
nom: must be distinguishable and contain the way	The new discorporation," "company," or "incorporated" or the abbreviation
	o," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
(1.101chput 25),100 = 11112 1112 1112 1112 1112 11112 11112 11112 11112 11112 1111	AS
C. Enter new mailing address, if applicable:	SS - C
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u> </u>
	RI RI
D. If amending the registered agent and/or registered new registered agent and/or the new registered	
Name of New Registered Agent	
_	(Florida street address)
	(rioriai sireei aairess)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Degistered Agent's Signature if shanging Deg	sintanad Acamta
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	Istered Agent: I am familiar with and accept the obligations of the position.
	,
Sign	nature 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	<u>PT</u>	John Do	<u>oc</u>	
\underline{X} Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		ARIEL CASTILLO	7740 NW 8TH AVE
Add				MIAMI, FL 33150
X Remove				
2) Change		<u></u>		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)				
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f an amendment provides for an exch	ange reclassificat	ion or cancells	ation of issued	charee	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	ained in the an	nendment itse	If:	
		<u></u>			
		 .			
					· · · - · · ·
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					·-

The date of each amendment		, if other than the
date this document was signed.	- 05/16/2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	this 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/wer by the shareholders was/we	re adopted by the shareholders. The number of votes east for the amendmere sufficient for approval.	nent(s)
	re approved by the shareholders through voting groups. The following stand 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/wet action was not required.	re adopted by the board of directors without shareholder action and share	holder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	er
05/16 Dated	/2018	
Daicu		
Signature		
SC	by a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other opointed fiduciary by that fiduciary)	
	RAUL PABLO COLON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	