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Division of Corporations

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: (850)617-6393

From:

Account Name

: PEDPO LUZQUINOS

Account Number : 120170000042

: (954)655-8413

Fax Number

: (954)432-8807

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2019-10-21 11:16 PEDRO TIGOUU 3115063

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COVER	LETTER
TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: AUTOSPROCCS INC	
DOCUMENT NUMBER: P18000066543	
The enclosed Articles of Amendment and fee are submitted for filing	g.
Please return all correspondence concerning this matter to the follow	ving:
ANDRES F, CREIXEMS	
Name of Co	ntact Person
Firm/ C	ompany
8670 TAFT STREET	
Add PEMBROKE PINES, FL 33024	ress
City/ State at	d Zip Code
PLUZQUINOSF@HOTMAIL.COM	
E-mail address; (to be used for future an	nual report notification)
For further information concerning this matter, please call:	
PEDRO LUZQUINOS	54 655-8413
Name of Contact Person	Arua Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Fl	orida Department of State:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & Certificate of Status Certified Co (Additional enclosed)	py Certificate of Status
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 Tallahassoe, FL 32301

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FILED

	of	
AUTOSPROCCS INC	2619 (OCT 21 P 图 时
(Name of Corpora	tion as currently filed with the Florida Dept, of Si	tate) S = C.
P18000066543		MASSEE, FLERIER
(Doc	ment Number of Corporation (If known)	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts t	the following amendment(s)
A. If amending name, enter the new name of the	corporation;	
		The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Cot word "chartered." "professional association," or th	p," "Inc," or Co". A professional corporation n	" or the abbreviation name must contain the
B. <u>Enter new principal office address, if applicate</u> (Principal office address <u>MUST BE A STREET AL</u>		
C. Francisco de Mina de La Maria de La Mar		
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE B	<u></u>	
D. [[amending the registered agent and/or regist new registered agent and/or the new registere		— ———— he
Name of New Registered Agent		
-	(Floridu sireet address)	
Vine Prairie and Other Address	, Floric	da
New Registered Office Address:	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re thereby accept the appointment as registered agent.	gistered Agent I am familiar with and accept the obligations of the	र position.
Sig	nature of New Degistered Agent, if changing	

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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 officeridirector 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, Salty 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 Duc		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u> N'агпе</u>		Address
1)Change	T	LUZQUINOS, PEDRO) J	8670 TAFT STREET
Add				PEMBROKE PINES, FL 33024
X Remove				
2) Change				
Add				
Remove				
3) Change			<u> </u>	
Add				
Rcmove				
4) Change				
Add				
Remove				
5) Change				
Remove				
6) Change		 		
Add				
Remove				
		Page 2 of	4	
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(Attach additional sheets, if necessary). MODIFY PRESIDENT LAST NAME	cles, enter change(s) h (Bo specific)	<u>:re</u> :	
OLD ONE:	- <u></u> -		
Title P. CREIXEMS ZULOAGA, ANDRES	S E		
NEW ONE:			
Title P. CREIXEMS, ANDRES E.			
			
			
F. If an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	inge, reclassification, of diment if not contained	e cancellution of issued shares, in the amendment itself:	
	· - ·		
	· "·		
	·		
			
			

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	, , ,	p 0 0 3 (150 6)
The date of each amendment(s) adoption: date this document was signed.	10-21-2019	if other than the
Effective date if applicable:		
	(no more than 90	days after unwndmen! file date)
Note: If the date inserted in this block doc document's effective date on the Department	s not meet the applies of State's records.	ble statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The r or approval.	number of votes cast for the amendment(x)
☐ The amendment(s) was/were approved by must be separately provided for each voti	the shareholders throu ing group entitled to vo	gh voting groups. The following statement separately on the amendment(s):
"The number of votes east for the an	nendment(s) was/were	sufficient for approval
by		
ŕ	voting group)	
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors w	thout shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	ne incorporators withou	ut shareholder action and shareholder
Dated	 	_
Signature Avdes	Grix ems 7	
(By a director, presched, by an in	esident or other office	r — if directors or officers have not been hands of a receiver, trustee, or other court
ANDRES	S E, CREIXEMS	
	(Typed or printed na	me of person signing)
PRESIDE	ENT	
	(Title of	person signing)

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