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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: STAR AUTO BODY COLLISION II CORP P19000001727 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **FERMIN JARQUIN** Name of Contact Person Firm/ Company 2551 NW 23 ST Address MIAMI FL 33142 City/ State and Zip Code NORMAOFFICE26@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 273-5820
Area Code & Daytime Telephone Number FERMIN JARQUIN 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

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Sec

Amendment Section
Division of Corporations
Clifton Building

Articles of Amendment to Articles of Incorporation of

STAR AUTO BODY COLLISION II CORP

(Name of Corporation	n as currently filed with the F	lorida Dept. of State)		
P19000001727		<u> </u>		
(Docume	nt Number of Corporation (if k	nown)		
Pursuant to the provisions of section 607.1006. Florida Sits Articles of Incorporation:	Statutes, this <i>Florida Profit Co</i>	rporation adopts the follow	ing antendmei	nt(s) t
A. If amending name, enter the new name of the corp	poration:			
			The new	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the al	"Inc," or "Co". A professio	or "incorporated" or the onal corporation name mus	abbreviation	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	UESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX		SECRETARY	2019 APR 24	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		iter the name of the	AM II: 28	
Name of New Registered Agent			_	
	(Florida street address)		_	
New Registered Office Address:		Florida		
	(City)	(Ziq	Code)	
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. It		e obligations of the position		
<u> </u>	ure of New Registered Agent in		_	

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>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	ALVA NUBIA JARQUIN	2551 NW 23 ST	
X Add			MIAMI FL 33142	
Remove				
2) Change				
Add				
Remove				
3) Change	-			
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)	
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	711	
f an amendment provides for an excha	nge, reclassification, or cancel	lation of issued shares
f an amendment provides for an exchaprovisions for implementing the amen	nge, reclassification, or cancel Iment if not contained in the a	lation of issued shares, mendment itself:
f an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	nge, reclassification, or cancel Iment if not contained in the a	lation of issued shares, mendment itself;
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provisions for implementing the amen	nge, reclassification, or cancel dment if not contained in the a	lation of issued shares, mendment itself:

The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date if applicable:	04/16/2019	
	(no more than 90 da	vs after amendment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	•
■ The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The nun sufficient for approval.	ober of votes cast for the amendment(s)
☐ The amendment(s) was/were a must be separately provided;	approved by the shareholders through for each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were suf	ficient for approval
by	(voting group)	"
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without s	hareholder action and shareholder
04/16/20 Dated	019	· -
Signature	Ferring &	MAN TO THE PARTY OF THE PARTY O
	director, president or other officer -	
selec appo	nted, by an incorporator – if in the han inted fiduciary by that fiduciary)	ds of a receiver, trustee, or other court
	FERMIN JARQUIN	
	(Typed or printed name	of person signing)
	PRESIDENT	
	(Title of per	son signing)