PIQ 000010369

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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: _____

DOCUMENT NUMBER: P19000016369

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

YANELYS GARCIA TAMAYO

Name of Contact Person

HERNANDEZ TOWING SERVICES INC.

Firm/ Company

4814 N HALE AVE

Address

TAMPA, FL 33614

City/ State and Zip Code

AUTOBODY\$HOP813@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 YANELYS GARCIA TAMAYO
 at (786)
 525-9051

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	of	22
HERNANDEZ TOWING SERVICES INC		The second
(<u>Name of Corpora</u>	ition as currently filed with the Florida Dept.	of State)
P19000016369		10 -
(Doci	ument Number of Corporation (if known)	10 Sta
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Florida Profit Corporation</i> add	opts the following an endmented to
A. If amending name, enter the new name of the	corporation:	
SEVERINO CAR RENTAL INC		The new
name must be distinguishable and contain the word " "Inc., " or Co., " or the designation "Corp," "Inc "chartered," "professional association." or the abb	c," or "Co". A professional corporation na	or the abbreviation "Corp.,"
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AL</u>		

C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)

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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:

<u>Name of New Registered Agent</u>		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
<u>New Registered Agent's Signature, if changin</u> hereby accept the appointment as registered ag		gations of the position.
Acto.		

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

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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> P.L</u>	John Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Address</u>
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach addition	al sheets, if necessary).	(Be specific)			
				<u> </u>	
F. <u>If an amendme</u>	ent provides for an excl	hange, reclassification	or cancellation of iss	ued shares.	
<u>provisions for</u> til not apr	r <mark>implementing the</mark> amo plicable, indicate N/A)	endment if not contain	ed in the amendment	itself:	
() <i>pp</i>					
				· · · · · · · · · · · · · · · · · · ·	
				·	

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,	03/05/2024	
 The date of each amendment(s) ad date this document was signed. 	option:	, if other than the
-	5/2024	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, th partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendn fficient for approval.	iem(s)
	roved by the shareholders through voting groups. The following staces with the shareholders through voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bv		
	(voting group)	
03/05/2024 Dated	Δ	
Signature	Nº	
selected	rector, president or other officer – if directors or officers have not b l, by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary)	
	YANELYS GARCIA TAMAYO	

(Typed or printed name of person signing)

PRESIDENT

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(Title of person signing)