## P19000011101

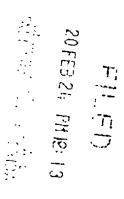
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: AARON AND ETI	HAN MOBILE MECHAN	ICS AND DETAIL INC.		
	MBER: P19000017107				
	<i>les of Amendment</i> and fee are sul	bmitted for filing.			
Please return all co	rrespondence concerning this mat	tter to the following:			
	SARFRAZ HUSAIN				
	<del></del>	Name of Contact Persor	1		
	AARON AND ETHAN MOBILE MECHANICS AND DETAIL INC.				
	<del></del>	Firm/ Company	<del></del>		
	1933 SW OAKWOOD ROAD				
	Address				
	PORT SAINT LUCIE, FL 34953				
	-	City/ State and Zip Code	e		
	sarfrazh2000@yahoo.com				
	•	ed for future annual report	notification)		
For further informa	tion concerning this matter, pleas	se call: 954 at (	803-9523		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check	for the following amount made p	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation

AARON AND ETHAN MOBILE MECHANICS AND DETAIL INC.

(Name of Corporation as cu	<u>irrently filed with the Flo</u>	rida Dept. of State)	
219(00017107			
(Document Nu	mber of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Florida Statute ts Articles of Incorporation:	es, this <i>Florida Profit Corp</i>	oration adopts the followi	ng amendment(s)
A. If amending name, enter the new name of the corporati	ion:		
AARON AND ETHAN MECHANICS AND DETAIL INC.			The new
name must be distinguishable and contain the word "corporati "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	o". A professional corp		
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	)		
	<del></del>	<u> </u>	2:
The same with the same of the			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		` ' ' '	(3) []
		· .	
		••	
		<u> </u>	<u></u>
<ol> <li>If amending the registered agent and/or registered office new registered agent and/or the new registered office a</li> </ol>		er the name of the	ω
Name of New Registered Agent	·		_
	<del></del>		_
	vida street (ddress)		
New Registered Office Address:	(City)	, Florida(Zin	(Code)
	· · · · · · · · · · · · · · · · · · ·		
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fai		obligations of the position.	
<del></del>	New Registered Agent, if c	harring	

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)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			27. 50
2) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove 3 ) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	<del> </del>
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)		
<del>-</del>	·	
<del></del>		
<del></del>		
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	(E. N	د.
	29FEB 24	,
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	. ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
provisions for implementing the amendment if not contained in the amendment itself:	12	
(if not applicable, indicate N/A)		
	PH	
	<del></del>	
	<u> </u>	
	<del>2.                                    </del>	
· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s	adoption:				_, if other than the
date this document was signed.					
Effective date <u>if applicable</u> :					
	(no mo	re than 90 days after at	mendment file date)		
Note: If the date inserted in thi document's effective date on the			filing requirement	s, this date will i	not be listed as the
Adoption of Amendment(s)	(CHECK O	<u>NE</u> )			
☐ The amendment(s) was/were action was not required.	adopted by the incorpor	ators, or board of direct	tors without shareho	older action and s	shareholder
The amendment(s) was/were by the shareholders was/were			otes cast for the amo	endment(s)	
☐ The amendment(s) was/were must be separately provided					
"The number of votes of	ast for the amendment(s	s) was/were sufficient fo	or approval	• *	
by				표일 :	20 F
, ————	(voting grou	p)			
				ا 	2
Pebruar Dated	y 16th, 2020			· · · · · · · · · · · · · · · · · · ·	ָּרוֹ, מֶּ
Signature	5 Museen	,			
(By : sele	a director, president or ceted, by an incorporator binted fiduciary by that	other officer – if director – if in the hands of a re			ริ
	SARFRAZ HUSAI	IN			
	(Typed o	r printed name of perso	on signing)		
	PRESIDENT				
	(Title of	nerson signing)			