P/9000019128

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PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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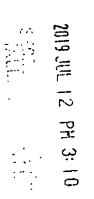
FLORIDA DEPARTMENT OF STATE Division of Corporations

June 25, 2019

GLEN ADRIA ALAYON 12805 PORTSAID RD OPA LOCKA, FL 33054

SUBJECT: JUNK YARD MIAMI, CORP

Ref. Number: P19000019128



We have received your document for JUNK YARD MIAMI, CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood Regulatory Specialist II

Letter Number: 819A00012885

Articles of Amendment

to

Articles of Incorporation of

Tunk Yord Migni Copp.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
Pig 0000 19128	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:	(s) tc
A. If amending name, enter the new name of the corporation:	
The new	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
2	
——————————————————————————————————————	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
Name and the AT DE AT OST OTT RELEGIAN	- C
	77
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:	
Name of New Registered Agent 9/EN Adria ALAYON	
12805 PORTSOID Rd	
(Florida street address)	
New Registered Office Address: 699-locky, Florida 33054	
(City) (Zip Code)	
New Books and Access Cincian if the circ Desirent Access	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
- Action	
Signature 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 = Chie 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> <u>J</u>	ohn Doe	
X Remove	<u>v</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	VP	Daymet Oliva	50535W. 2NdsT Coral gables, \$13313
Add			Coral 9/10/05, 1/ 33/3
Remove			
2) X Change	P	GLEN Adria Alayon Correction	12805 Portsaid Rd
Add		Correction	Upa-10CK4 1+133034
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	,		
Remove			
6) Change			
Add			
Remove			

	adding additional A al sheets, if necessary	v). (Be specific)			
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an amendme	nt provides for an ex	xchange, reclassific	ition, or cancellati	ion of issued share	S.
rovisions for	implementing the a	mendment if not co	ntained in the ame	ndment itself:	±1
(if not app	licable, indicate N/A))			
• • •					
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The date of each amendment(s) adoption:	06/06/19	, if other than th
date this document was signed.		
A	00/00/19	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does no document's effective date on the Department of S		ents, this date will not be listed as th
Adoption of Amendment(s) (CHE	ECK ONE)	
The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap		amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting g	shareholders through voting groups. The follo group entitled to vote separately on the amend	
"The number of votes cast for the amend	lment(s) was/were sufficient for approval	
by	."	
by(votin	ng group)	
The amendment(s) was/were adopted by the b action was not required.	oard of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were adopted by the in action was not required.	ncorporators without shareholder action and sh	areholder
Dated Olo O	04/19	
	2016	
Signature (Pun diseases posic	dent or other officer – if directors or officers ha	we not been
	porator – if in the hands of a receiver, trustee,	
appointed fiduciary		J. C.
9	Then Adala Alayor Typed or printed name of person signing)).
	yped or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	