## P19000021567

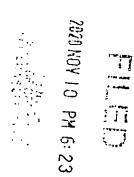
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DEC 1 6 2020 S. YOUNG

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ELECTRICAL AU	TO REPAIR CORP	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ERIKA AGUDELO		
		Name of Contact Person	1
	·	Firm/ Company	
	2682 OVERLAND RD #3B		
		Address	
	APOPKA, FL 32703		
		City/ State and Zip Cod	e
	erika.ag263@gmail.com		
•	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
ERIKA AGUDELO		at (407	558-6417
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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)
Ame Divi: P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

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ELECTRICAL AUTO REPAIR CORP			
(Name of Corporation as cu	rrently filed with the Florida De	pt. of State)	
P19000021567			
(Document Nun	nber of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation	adopts the following amer	idment(s) to
A. If amending name, enter the new name of the corporation	on:		
		The	new.
name must be distinguishable and contain the word "corporatio" Inc.," or Co.," or the designation "Corp," "Inc.," or "Co" "chartered," "professional association," or the abbreviation	o". A professional corporation	l" or the abbreviation ‡ <b>⊖</b> p	rp., "
B B			, . = ±41
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		102.0	٠
(1.1004)		<u> </u>	
			1 1
		7	•—
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			ي.
(Mailing address MAT BE A POST OF FICE BOX)	-		<del></del>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		ame of the	
Name of New Registered Agent	<del></del>		
		<u>.                                    </u>	
(Flor	ida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
N. D. C. L. D. C. L. T. D. C. L.			
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	<b>Agent:</b> ulliar with and accept the obligation	ons of the position.	
		-	
Signature of ?	New Registered Agent, if changing	,	
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)

Example:

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	1,1	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>	Address
1) Change	MGR	ERIKA AGUDELO	2682 OVERLAND RD #3B
Add			APOPKA, FL 32703
Remove  2) Change	PRES	ERIKA AGUDELO	2682 OVERLAND RD #3B
X Add			APOPKA, FL 32703
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change		<del>-</del>	
Add			<del></del>
Remove			

amending or adding additional Arti atach additional sheets, if necessary).	(Be specific)
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lf an amandmant provides for an aval	nange, reclassification, or cancellation of issued shares,
nrovisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument it not companied in the amendment itsen.
(3	
-	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
Effective date in applicable.	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this bedocument's effective date on the D	block does not meet the applicable statutory filing epartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors wit	hout shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes casufficient for approval.	st for the amendment(s)
	proved by the shareholders through voting groups.  reach voting group entitled to vote separately on th	
"The number of votes cast	for the amendment(s) was/were sufficient for appro	oval
by	(voting group)	.,
	(voing group)	
11/06/2020 Dated		
Signature EV	ika Agudelo	
selecte	lirector, president or other officer – if directors or of d, by an incorporator – if in the hands of a receiver, ted fiduciary by that fiduciary)	
	ERIKA AGUDELO	
	(Typed or printed name of person signi-	ng)
	PRES	
	(Title of person signing)	