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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Canaan Service and Repair Company DOCUMENT NUMBER: P19000044757 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Maria C Perez Name of Contact Person Paz Accounting Company Firm/ Company 9445 SW 40 Street, Suite 106 Address Miami FL 33165 City/ State and Zip Code maria@pazaccounting.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 900-0729

Area Code & Daytime Telephone Number Maria C Perez 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 Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Canaan Service and Repair Company

(Name of Corporation	as currently filed with the	Florida Dent. of State)	
P19000044757		,	
(Documer	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florida Profit C</i>	Corporation adopts the following am	endment(s) to
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," "Inc," of "chartered," "professional association," or the abbrevia	or "Co". A professional c	ncorporated" or the abbreviation "C	Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR			<del></del>
(1 time qui office unaress <u>MOST BE A STREET ADDR</u>	<u>.655</u> ) 		
	<del></del>	· ;-	<u> </u>
C. Enter new mailing address, if applicable:	· .		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	,	33	
			<del></del> :
			, and the second
		ERY CO	1
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		enter the name of thes	
		E C C	
Name of New Registered Agent		<del></del>	
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
Now Designated Asset State to the Company of the State Designature	toward towards		
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	<del>tereu Agent.</del> am familiar with and accept t	he obligations of the position.	
C:	ON Designation of Assess	26 - L	
Signatu	ure of New Registered Agent,	y cnanging	
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 60°	7.0120 (11) (c), 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	
<u>X</u> Add <u>S</u>	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change _			
Add			
Remove			
2) Change			
Add			<del> </del>
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<del></del>	
<del></del>	
	<del>-</del>
·	
<u> </u>	
If an amandment provides for an arch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	PA 0941421 to the compant FFIN 94 1941424
e organization is amending the PEIN from	m 84-0844434 to the correct FEIN 84-1844434.

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The date of each amendment date this document was signed	May 22, 2019 s) adoption:		, if other than the
Effective date if applicable:	May 22, 2019		
	(no more tha	an 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t		pplicable statutory filing requirements, this date will ds.	not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
☐ The amendment(s) was/wer action was not required.	adopted by the incorporators,	, or board of directors without shareholder action and	shareholder
The amendment(s) was/web by the shareholders was/web		The number of votes cast for the amendment(s)	
		s through voting groups. The following statement d to vote separately on the amendment(s):	
"The number of votes	east for the amendment(s) was	s/were sufficient for approval	
by		<del>"</del>	
	(voting group)	•	
DatedSignature(Bse	a'director, president or other o	officer – if directors or officers have not been n the hands of a receiver, trustee, or other court iary)	_
	Maria C Perez		
	(Typed or print	ited name of person signing)	
	Registered Agent		