## P19000 046 687

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JUL 31 2019 S. YOUNG



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: HOLLYWOO	DD QUALITY CARS OF OCALA INC
DOCUMENT NUMBER: P19000046687	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
KHAYMANIE CHULU	J
	Name of Contact Person
	Firm/ Company
233 NW 10TH ST	
-	Address
OCALA, FL 34475	
	City/ State and Zip Code
HOLLYWOODQUALITYCA	A@ATT.NET
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	, please call:
KHAYMANIE CHULU	at ( 352 304-6301
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount r	nade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## HOLLYWOOD QUALITY CARS OF OCALA, INC

(Name of Corporation as	currently filed with the Florida Dep	t. of State)
P19000046687		
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this <i>Florida Profit Corporation</i> a	dopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:	<i>T</i> 1
name must be distinguishable and contain the word "co". "Corp.," "Inc.," or Co.," or the designation "Corp," "Inword "chartered," "professional association," or the abbra	nc," or "Co". A professional corpor	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	<u>N/A</u>	
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	28 H
D. If amending the registered agent and/or registered o	ffice address in Florida, enter the na	<del></del>
new registered agent and/or the new registered offic	e address:	
Name of New Registered Agent N/A		
	Florida street address)	· · · <del>- · · · · - · - · - · · ·</del>
New Registered Office Address:		tilisaida
New Registerea Office Address:	(City)	Florida (Zip Code)
	.,	• ,
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		as of the position.
	of Nov. Projectional Court if the	
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 = 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 Do	<u>c</u>	
X Remove	<u>V</u>	Mike Jo	nes	
<u>X</u> Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change	P		DHARAMDEO PURAN	233 NW 10TH ST
Add X Remove				OCALA, FL 34475
Remove				
2) Change				
Add				<del></del>
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add		•		
Perrova				

	ts, if necessary). (Be specific)	
<u>\</u>	NA	
<del></del>		
		****
<del></del>		
<del></del>		
provisions for imple	vides for an exchange, reclassification, or cancellation of issued shares, menting the amendment if not contained in the amendment itself:	
(if not applicable	. indicate N/A)	
	NIA	
	•	
		<u></u>
		<del></del>

The date of each amendment(s) date this document was signed.	adoption: NA	, if other than the
Effective date if applicable:	MA	
	(no more than 90 days after	amendment file date)
Note: If the date inserted in this document's effective date on the		ory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of sufficient for approval.	votes cast for the amendment(s)
	pproved by the shareholders through voting or each voting group entitled to vote separa	
"The number of votes ca	st for the amendment(s) was/were sufficient	for approval
by		
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareho	older action and shareholder
JULY 16 Dated		
Signature		
selec	director, president or other officer – if dire ted, by an incorporator – if in the hands of a inted fiduciary by that fiduciary)	
	KHAYMANIE CHULU	
	(Typed or printed name of per	son signing)
	PRESIDENT	
	(Title of person si	gning)