P190000 88099

| (Requestor's Name) | | | | |
|---|-------------------------|--|--|--|
| (Address) | | | | |
| | Address) | | | |
| (0 | City/State/Zip/Phone #) | | | |
| PICK-UP | WAIT MAIL | | | |
| (E | Business Entity Name) | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

TO: Amendment Section Division of Corporations

.

| NAME OF CORPORATION: | ALMEIDA BROT | HER'S AUTO BODY PAI | NT INC | | | |
|--|---------------------------------------|--|---|--|--|--|
| DOCUMENT NUMBER: | | 0088099 | | | | |
| The enclosed Articles of Amend | ment and fee are su | bmitted for filing. | | | | |
| Please return all correspondence | concerning this ma | itter to the following: | | | | |
| | YOAND | RI ALMEIDA ARENCIBL | A | | | |
| | | Name of Contact Person | n | | | |
| | | Firm/ Company | | | | |
| | | 1467 Kilbee Trl | | | | |
| | Address | | | | | |
| | Orlando, FL 32825 | | | | | |
| | | City/ State and Zip Cod | e | | | |
| | yoan | ndrialmeida83@gmail.com | | | | |
| E-ma | iil address: (to be u | sed for future annual report | notification) | | | |
| For further information concerni | ng this matter, plea | se call: | | | | |
| YOANDRI ALMEIDA ARENO | CIBIA | at (305 | _) | | | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | | | |
| Enclosed is a check for the follo | wing amount made | payable to the Florida Depa | artment of State: | | | |
| | 3.75 Filing Fee & rtificate of Status | □\$43.75 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 | | Amend Divisio The C | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 | | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ALMEIDA BROTHER'S AUTO BODY PAINT INC

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) | • |
|---|---|------------------------------|
| P19000088099 | | |
| (Document Number | of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the following | amendment(s) 1 |
| A. If amending name, enter the new name of the corporation: N/A | | |
| name must be distinguishable and contain the word "corporation." | "company" or "incorporated" or the abbreviation | The gnew ; ;; : Corn "=:= |
| "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". | A professional corporation name must contain | |
| "chartered," "professional association," or the abbreviation "P.A. | •• | |
| B. Enter new principal office address, if applicable: | N/A | ර (:∈(|
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | <u> </u> |
| | | <u>- 5</u> |
| | | <u>ပ</u> ာ : ် |
| | | <u></u> |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | |
| (Matting duaress MAT BE A POST OFFICE BOX) | | |
| | | |
| | | |
| | | |
| D. If amending the registered agent and/or registered office ad- | | |
| new registered agent and/or the new registered office addres | <u> </u> | |
| Name of New Registered Agent N/A | | |
| | | |
| (Florida s | treet address) | |
| ` | | |
| New Registered Office Address: | Florida (City) (Zip Co | |
| | ((1)) | tie) |
| | | |
| New Registered Agent's Signature, if changing Registered Ager | .f- | |
| hereby accept the appointment as registered agent. I am familian | | |
| | | |
| | | |
| <u></u> | | |
| 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)

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 | e | |
|-------------------------------|--------------|--------------|---------------------------|-------------------|
| X Remove | <u></u> | Mike Jor | | |
| | | | | |
| X Add | <u>SV</u> | Sally Sm | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) X Change | PTD | _ | YOANDRI ALMEIDA ARENCIBIA | 1467 Kilbee Trl |
| Add | | | | Orlando, FL 32825 |
| Remove | | | | |
| 2) Change | VP | _ | YURIEN ALMEIDA ARENCIBIA | 1467 Kilbee Trl |
| Add | | | | Orlando, FL 32825 |
| X Remove Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | <u>—</u> | | |
| Add | | | | |
| Remove | | | | |

| (Auach additional sh | neets, if necessary). | (Be specific) | |
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| If an amendment p | rovides for an exc | hange, reclassification, or cancellation of issu | ied shares, |
| provisions for imp | olementing the amoble, indicate N/A) | endment if not contained in the amendment i | tself: |
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| | APRIL 1, 2020 | |
|---|--|---|
| The date of each amendment(s) a date this document was signed. | doption: | , if other than the |
| Effective date <u>if applicable</u> : | APRIL 1. 2020 | |
| | (no more than 90 days after amendmen | t file date) |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable statutory filing resepartment of State's records. | quirements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ■ The amendment(s) was/were adaction was not required. | opted by the incorporators, or board of directors without | out shareholder action and shareholder |
| ☐ The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes cast fufficient for approval. | for the amendment(s) |
| | proved by the shareholders through voting groups. The each voting group entitled to vote separately on the each voting group entitled to vote separately on the each voting group entitled to vote separately on the each voting group entitled to vote separately on the each voting group entitled to vote separately on the each voting groups. | |
| "The number of votes cas | t for the amendment(s) was/were sufficient for approv | al |
| by | (voting group) | |
| | (voting group) | |
| APRIL 1, | 2020 | |
| Dated | | |
| Signature | | |
| (By a c | director, president or other officer if directors or officed, by an incorporator – if in the hands of a receiver, trated fiduciary by that fiduciary) | |
| | YO ANDRI ALMEIDA AN | - E w Cibi A |
| | (Typed or printed name of person signing | (1) |
| | President | |
| | (Title of person signing) | |

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