## P20 000032077

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Amp n Kayla Mo	otors inc	
DOCUMENT NUM	IBER: P20000032077		
The enclosed Article	s of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Tabreysha Jackson		
		Name of Contact Perso	n
	Amp n Kayla Motors inc		
Firm/ Company			
	1085 w 30th st		
		Address	
	jacksonville fl 32209		
		City/ State and Zip Cod	e
	ampnkaylamotors@gmail.	com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call: 904	、4509579
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made		•
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Amp n Kayla Motors inc	
	tly filed with the Florida Dept. of State)
P20000032077	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation,"	"company" or "in-special P" of the interest P"
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	6316 san juan ave suite 23
(Principal office address MUST BE A STREET ADDRESS)	Jackschville, Fl 3009
C. Enter new mailing address, if applicable:	7020
(Mailing address MAY BE A POST OFFICE BOX)	
	co
	P 11.
) If amonding the resistant large 1/2 is a second	dress in Florida, enter the name of the
<ol> <li>If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address</li> </ol>	Iress in Florida, enter the name of the
Name of New Registered Agent	
	<del></del>
	treet address)
New Registered Office Address:	(City) . Florida(Zip Code)
	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New F	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> 14</u>	John 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	
() Change	PDT	Tabreysha Jackson	1085 w 30th street	
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<del></del>		
Add				
Remove				
9 Change				
Add				
Remove				

	ling additional Articles, enter heets, if necessary). (Be spec	rific)			
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	<del></del>	<del> </del>		<del></del>	
	<del></del>				
<del></del>		<del> </del>		<del></del>	
<u>in amendment p</u>	rovides for an exchange, recla	assification, or canc	ellation of issued sha	ares.	
<u>ovisions for imp</u>	lementing the amendment if i	not contained in the	amendment itself:	<del></del>	
(y noi appiicat	le. indicate N/A)				
<del></del>			<del></del>		
				<del></del>	

The date of each amendment(s) acd date this document was signed.	option:, if other than the
Effective date <u>if applicable:</u>	
<del></del>	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient for approval
by	
	(voting group)
06/03/2020 Dated	
selected	redor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)
	tabreysha jackson
-	(Typed or printed name of person signing)
	president
-	(Title of person signing)