P20000060010

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Au	uiess)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
 -	- 11201	
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
• =====	_	
		
Special Instructions to	Filing Officer:	

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DEC 17 2020 LALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CAR & I, INC.		
	BER: P20000060010		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	IMELDA G. CONDE		
		Name of Contact Person	1
	CAR & I, INC.		
		Firm/ Company	
	1223 CITRUS HILL COURT		
		Address	
	SEFFNER, FL 33584		
		City/ State and Zip Code	e
	ig_conde@outlook.com		
	-= -	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call: at (at	325-0225
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 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)
	iling Address		Address
Amendment Section			Iment Section
	rision of Corporations D. Box 6327		on of Corporations entre of Tallahassee
	lahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Core				
· 	poration as currentl	y filed with the Flor	ida Dept. of State)	
CAR & I, INC.				
(1	Document Number o	f Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Its Articles of Incorporation:	Florida Statutes, this	Florida Profit Corpo	ration adopts the foll	owing amendment(s
. If amending name, enter the new name of	the corporation:			
NOT APPLICABLE				The new
ame must be distinguishable and contain the wo Inc" or Co" or the designation "Corp," chartered," "professional association," or the	"Inc," or "Co". A			viation "Corp.,"
3. Enter new principal office address, if appl Principal office address <u>MUST BE A STREE</u>		N/A	· · ·	<u> </u>
				12
Enter new mailing address, if applicable:		NI/ A		606-1-83
(Mailing address MAY BE A POST OFFIC	CE BOX)	N/A 		
			r the name of the	
). If amending the registered agent and/or renew registered agent and/or the new regis			r the name of the	
			r the name of the	·
new registered agent and/or the new regis			r the name of the	. .
new registered agent and/or the new regis		<u>:</u>	r the name of the	
new registered agent and/or the new regis	tered office address	<u>:</u>	r the name of the	

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	V	_	CRUZ AGUILAR RIVERA	1223 CITRUS HILL CT
X Add				SEFFNER, FL 33584
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
	
	*
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(g not appricative, material tox)	
	-
	

The date of each amendments date this document was signed.	s) adoption:, if other than th
-	11-9-2020
Effective date if applicable:	(no more than 90 days after amendment file date)
	nis block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	c approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
IMELDA G. CON	DE, President
by	(voting group)
11/9/20 Dated Signature	
sel	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	IMELDA G. CONDE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)