## P20000066832

(Requestor's Name)		
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(Address)	.	
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(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

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and the con-

NAME OF CORPOR	ATION: A1 FLETCHMOR ]	TIRES INC	
DOCUMENT NUMB	ER: P20000066832		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
	DANA CHAPDELAINE		
-		Name of Contact Person	n
	HORIZON FINANCIAL SERV	ICES LLC	
-		Firm/ Company	
	5342 CLARK RD 111		
-		Address	<del></del>
	SARASOTA FL 34233		
-		City/ State and Zip Cod	e
	horizonfsllc@gmail.com E-mail address: (to be us	sed for future annual report	notification)
		·	
For further information	concerning this matter, pleas	se call:	
DANA CHAPDELAINE		at (_941	) 378-4546
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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)
Amer Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415 f	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

·- ·.

A1 FLETCHMOR TIRES INC			
(Name o	of Corporation as current	tly filed with the Florida Dept. of State)	-
P20000066832			٠
	(Document Number	of Corporation (if known)	, .
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the follo	owing amendme
A. If amending name, enter the new na	ame of the <u>corporation:</u>		
			The new
	"orp," "Inc," or "Co".	"company," or "incorporated" or the abbrev A professional corporation name must co	riation "Corp.,"
B. Enter new principal office address,	if applicable:	5553 E LONG COMMON CT	
(Principal office address MUST BE A STREET ADDRESS)		SARASOTA FL 34235	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5553 E LONG COMMON CT	
		SARASOTA FL 34235	
D. If amending the registered agent ar new registered agent and/or the new			
Name of New Registered Agent	HORIZON FINANCIAL S	ERVICES LLC	
	5342 CLARK RD 111		
	(Florida s	treet address)	
New Registered Office Address:	SARASOTA	, Florida 342	
		(City)	Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen ered agent. I am familiar	tt: with and accept the obligations of the positi	on.
<del></del>	Signature of New	Registered Agent, if changing	
	ingilian 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)

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 Doe		
X Remove	<u>V</u>	Mike Jone	<u>es</u>	
X Add	<u>sv</u>	Sally Smi	<u>th</u>	
Type of Action (Check One)	<u>Title</u>	1	<u>Name</u>	Address
1) Change	Р		DUSTYN K MORALES	5700 HAINES RD N
Add				ST PETERSBURG FL 33714
× Remove				
2) Change	Р		MICHAEL COSTIGAN	5553 E LONG COMMON CT
X Add				SARASOTA FL 34235
Remove Change				
Add				
Remove				
4) Change		<u> </u>		<del></del>
Add				<del></del>
Remove				
5) Change			***	
Add				
Remove				
6) Change				
Add				
Remove				

(Attach <i>additio</i>	nal sheets, if necessary).	(Be specific)			
N/A					
<u></u>					
	<del></del>				
F. If an amandm	ent provides for an exch	ango roclassifi	eation or cancelle	ition of issued shar	·05
provisions fo	r implementing the amer	idment if not co	ontained in the ar	nendment itself:	***
(if not ap	plicable, indicate N/A)		<u>-</u>	_	
N.11.4					
N/A					
					_

The date of each amendment(s) addate this document was signed.	doption: NOVEMBER 2, 2020	, if other than the
Effective date <u>if applicable</u> :		
**************************************	(no more than 90 days after amendment file (	date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing require epartment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☑ The amendment(s) was/were adeaction was not required.	opted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the officient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The foliceach voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selecte	frector, president or other officer – if directors or officers he, by an incorporator – if in the hands of a receiver, trustee	
appoint	red fiduciary by that fiduciary)	
	MICHAEL COSTIGAN	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	