

8/21/23, 1:20 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000289797 3)))



H230002897973AJCE

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6388

From:

Account Name : TAX ZONE INC.
Account Number : I20190080044
Phone : (407)888-3131
Fax Number : (888)453-0509

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Accountant@taxzonefl.com

COR AMND/RESTATE/CORRECT OR O/D DESIGN
1 PITSTOP, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

850-617-6381

8/22/2023 7:17:13 AM PAGE 1/001 Fax Server



August 21, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

1 PITSTOP, INC.
2170 W STATE RD 434
STE #350
LONGWOOD, FL 32779US

SUBJECT: 1 PITSTOP, INC.
REF: P20000077438

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

One of the boxes must be checked for the adoption of the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

FAX Aud. #: H23000289797

Letter Number: 523A00019400

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: J PITSTOP, INC.

DOCUMENT NUMBER: P20000077433

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ED KOTLER

Name of Contact Person

TAX ZONE INC

Firm/ Company

8865 COMMODITY CIR STE 4

Address

ORLANDO, FL 32819

City/ State and Zip Code

ACCOUNTANT@TAXZONEFL.COM

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL

2023 AUG 22 AM 8:50

FILED

For further information concerning this matter, please call:

ED KOTLER

at (407) 888-3131

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

PITSTOP, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P20000077438

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1032 MILLER DR

ALTAMONTE SPRINGS, FL 32701

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1032 MILLER DR

ALTAMONTE SPRINGS, FL 32701

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

1032 MILLER DR

(Florida street address)

New Registered Office Address: ALTAMONTE SPRINGS, Florida 32701

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

FILED

2023 AUG 22 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FL

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	P	NOURIAN, JONATHAN	1032 MILLER DR
<input type="checkbox"/> Add			ALTAMONTE SPRINGS, FL 32701
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

2023 AUG 22 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

2023 AUG 22 AM 8:50
SECRETARY OF STATE
S: ALLAHASSEE, FL

FILE

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

1. The first step in the process of creating a new product is to identify a market need. This involves conducting market research to determine what consumers want and what they are willing to pay for. Once a market need has been identified, the next step is to develop a product concept. This involves creating a detailed description of the product, including its features, benefits, and target market. The product concept is then used to develop a business plan, which outlines the company's strategy for producing and marketing the product. The business plan is then used to secure financing and to launch the product.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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

by _____
(voting group)

Dated

8/21/23

Signature

(By a director, president or other officer if directors or officers have not been selected, by an incorporator if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Jonathan Nourian
(Typed or printed name of person signing)

P
(Title of person signing)

2023 AUG 22 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FL

FILED