## P21000046021

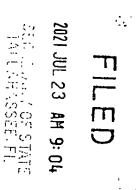
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Garage Transform	ations, Inc.	
DOCUMENT NUM	IBER: P21000046021		
	s of Amendment and fee are so	ibmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Donna Bryant		
		Name of Contact Person	n
	Garage Transformations, Inc		
		Firm/ Company	
	234 Northeast Ebbtide Way		
		Address	
	Ocean Breeze, FL 34957		
		City/ State and Zip Cod	e
	dbr1957@aol.com		
	•	sed for future annual report	notification)
For further informati Donna Bryant	on concerning this matter, plea	954	) <del>821-1787</del>
	of Contact Person	at ( Area Co	) de & Daytime Telephone Number
Enclosed is a check t	or the following amount made		, ,
<b>\$35</b> 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)
Mailing Address			Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Garage Transformations, Inc.	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P21000046021	
(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) to
A. If amending name, enter the new name of the corporation:	
	77/
name must be distinguishable and contain the word "corporation," "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: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ZOZI JUL 23 SEGRENA PALLAMA
D. If amending the registered agent and/or registered office ade new registered agent and/or the new registered office address	
Name of New Registered Agent	<u> </u>
(Florida si	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New I	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)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Vincent N. Bryant, Jr.	234 Northeast Ebbtide way
X Add			Ocean Breeze, FL 34957
Remove			<u>u</u>
2) X Change	ST	Donna Bryant	234 Northeast Ebbtide Way
Add			Ocean Breeze, FL 34957
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		···	
Add			
Remove			· - · · · · · · · · · · · · · · · · · ·

(Attach additional sheets, if necessary).	(Be specific)	
	•	
	<del> </del>	
If an amendment provides for an exc	nange, reclassification, or cancellation	of issued shares,
provisions for implementing the am	ndment if not contained in the amend	ment itself:
(if not applicable, indicate N/A)		
incent N. Bryant, Jr and Vincent Nichola	Bryant each 50 percent shareholders	
	1	
		•
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July 20, 2021	
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, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholde action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendr by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following standard to 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)	
Signature  (By a director, president or, wher officer = if directors or officers have not be	- Vivin
selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Donna Bryant	
(Typed or printed name of person signing)	
President	
(Title of person signing)	