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COVER LETTER*

Division of Cor				
NAME OF CORPO	ORATION: J&K MOBLILE	MECHANIC INC		
	IBER: P21000047687			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	JEAN ROBERT EXUME			
		Name of Contact Person	1	
	J&K MOBILE MECHANIC	HNC		
		Firm Company		
	12910 NE 6TH AVENUE A	P1 8		
		Address		
	MIAMI FL 33163			
		City/ State and Zip Cod	t'	
For further informati	E-mail address: (to be us on concerning this matter, plea-	sed for future annual report	noi(fication)	
JEAN R EXUME		786 at (de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Dep	artment of State.	
S35 Filing Fee	□S43.75 Filling 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)	
<u>Mailing Address</u> Amendment Section Division of Corporations		Ameni	Address Intent Section on of Corporations	
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

(Name of Corporatio	or as currently filed with the Florida Dept. of State)
P21000047687	
(Document)	ent Number of Corporation (if known)
Pursuant to the provisions of section 607, 1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co-	rporation:
J & K MOBILE MECHANIC INC.	The new
name must be distinguishable and contain the word "co, "line," or Co,," or the designation "Corp," "line," "chartered," "protessional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation "Corp." or "Co". A professional corporation name must contain the word viation "P.A."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) D. If amending the registered agent and/or registered	ed office address in Florida, enter the name of the
new registered agent and/or the new registered of	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	
Signa	ture of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/arc being filed pursuant to s. 607.0126 (11) (c), 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 little:

P = President; Y= 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add-Example:

X Change	<u> </u>	John Doe	
X Remove	\underline{Y}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action Check One)	<u>l'itle</u>	<u>Name</u>	Address
l) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 1 Change			
Add			
Remove			
t) Change			
Add			
Remove			
5) Change			
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Remove			
63 Change			
Add			
Remove			

E. Ham	ending or adding additional Articles, enter change(s) here:	
(Attac	h additional sheets, if necessary) — (Be specific)	
		.—
		_
F. If an	amendment provides for an exchange, reclassification, or cancellation of issued shares,	
Brov	visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NZ1)	
	•	

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 da document's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was were adopted by the incorporators, or board of directors without shareholder action was not required.	on and shareholder
The amendment(s) was were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	N)
□ The amendment(s) was/were approved by the shareholders through voting groups. The tollowing statements be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Signature (By a director, president or office officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)	rt
Jean Robert Exeme (Typed or printed name of person signing)	
(Title of person signing)	