P21000048948

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911/21

COVER LETTER

TO: Amendment Ser Division of Cor			
NAME OF CORPO	DRATION: 504 Speed Service	s Corp	
DOCUMENT NUM	001000010010		
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:	
	Jaime Paredes		<u>.</u>
		Name of Contact Person	
	504 Speed Services Corp		
		Firm/ Company	
	3620 NW 115ave		
		Address	<u> </u>
	Doral, Florida 33178		
		City/ State and Zip Code	
	Jaimeparedes 1979@yahoo.co	om	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Jaime Paredes		786 at (3931780
Namo	e of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	rtment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ailing Address		Address
Amendment Section		Amendment Section	
	Division of Corporations Division of Corporations Division of Corporations The Corporations		
	P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 81		
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Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

504 Speed Services Corp			Marie
(<u>Name</u>	of Corporation as currentl	y filed with the Florida De	pt. of State)
P21000048948			٠,
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this a	Florida Profit Corporation	adopts the following amendment(
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,	Corp," "Inc," or "Co". A	company," or "incorporated professional corporation	" or the abbreviation "Corp.,"
D. E. a	1611 L1	N/A	
B. Enter new principal office address, (Principal office address MUST BE A S			
	·		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	
(Mauring address <u>MAT BE A POST</u>	<u>UFFICE BUX</u>)		·
			
D. If amending the registered agent as			ame of the
new registered agent and/or the ne		L	
Name of New Registered Agent	N/A		
	(Florida str	eet address)	
New Registered Office Address:	N/A		Florida
New Registered Office Address.		(City)	(Zip Code)
New Registered Agent's Signature, if o	hanging Registered Agent:		
I hereby accept the appointment as regis	tered agent. I am familiar v	with and accept the obligation	ons of the position.
	Signature of New P.	egistered 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)

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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
l) Change	✓ P Patricia N Roman	3620 NW 115ave
X Add	VILE PARSIENT	Doral, Florida 33178
Remove		
2) Change		
Add		
Remove 3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		
Kemove		

(Attach additional sh	ing additional Art eets, if necessary).	(Be specific)			
Α					
					
					
			 .		<u>.</u>
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- ·			<u> </u>		<u> </u>
					
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	·				
<u>If an amendment p</u>	royides for an exc	hange, reclassifica	ation, or cancella	tion of issued shar	res.
provisions for imp	tementing the amole, indicate N/A)	<u>enament ii not co</u>	ntaineo in the am	enament itsen:	
Α	,				
			,		

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<i>,</i>	08/10/2021	10 1 1
The date of each amendme		, if other than th
date this document was sign		
Effective date if applicable	N/A :	
- Appleading	(no more than 90 days after amendment file date)	
	n this block does not meet the applicable statutory filing requirements, this date is the Department of State's records.	e will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/v action was not required.	vere adopted by the incorporators, or board of directors without shareholder action	n and shareholder
	vere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.)
☐ The amendment(s) was/w must be separately provi	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):	11
"The number of vo	tes cast for the amendment(s) was/were sufficient for approval	
by N/A		
oy	(voting group)	
Dated	08/16/2021	
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)	
	Jaime Paredes	
	(Typed or printed name of person signing)	
	President Same	
	(Title of person signing)	