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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: ASG RENTAL CLUB INC						
DOCUMENT NUMBER	P21000070284						
The enclosed Articles of A	mendment and fee are submitted for filing.						
Please return all correspon	dence concerning this matter to the following:						
CLI	FFORD WALKER						
	Name of Contact Person						
	Firm/ Company						
131	1314 E LAS OLAS BLVD, SUITE 94						
	Address						
FOI	FORT LAUDERDALE, FL 33301						
	City/ State and Zip Code						
AV.	ALANCHEFINL@GMAIL.COM						
	E-mail address: (to be used for future annual report notification)						
For further information co	seerning this matter, please call:						
CLIFFORD WALKER	at (954 638-7673						
Name of Co	ntact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the	following amount made payable to the Florida Department of State:						
S35 Filing Fee	S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)						
Division P.O. Box	ent Section Amendment Section of Corporations Division of Corporations						

Articles of Amendment to Articles of Incorporation of

ASG RENTAL CLUB INC

7130 NEICHTE	0505 11.0	
(Name of Corporation as current)	y filed with the Florida Dept. of State)	
P210000	70284	
(Document Number o	f 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	s) to
A. If amending name, enter the new name of the corporation:		
The amending manner time the manne of the corporation		
name must be distinguishable and contain the word "corporation." "Corp.," or Co.," or the designation "Corp.," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	I professional corporation name must contain the word	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	53	
	24 PH	est l
	<u> </u>	- 1
C. Fatar now mailing address if applicables	24	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		; }
,	المنافقة الم	ڗ
	9	
D. If amending the registered agent and/or registered office addi	ross in Florida, antar the name of the	
new registered agent and/or the new registered office address		
Name of Van Paristand Agent		
Name of New Registered Agent		
(Fl. 1)		
(Florida str	eet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
Nam Danistaned Agent's Cignoture if shanging Designared Agent		
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar v	ivith and accept the obligations of the position.	
Signature of New Ro	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)

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>P1</u>	John Do	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	SECR	_	DIANA SANCHEZ-PEREZ	1314 E LAS OLAS BLVD
X Add				FORT LAUDERDALE FL 33301
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach ada	g or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)
· · · · · · · · · · · · · · · · · · ·	
<u>f an amei</u>	lment provides for an exchange, reclassification, or cancellation of issued shares,
provision	for implementing the amendment if not contained in the amendment itself:
(if no	applicable, indicate N/A)
_	

•

The date of each amendment(s) late this document was signed.	adoption:	, if other than th
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file c	
	(no more than 90 days after amendment file c	tate)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing required Department of State's records.	ments, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	e amendment(s)
	pproved by the shareholders through voting groups. The follower each voting group entitled to vote separately on the amend	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
08/23/20	021	
Dated		
Signature	Cinthia Gonzalez Quinteros	
(By a	director, president of other Officer - if directors or officers h	ave not been
	ed, by an incorporator – if in the hands of a receiver, trustee.	, or other court
appor	nted fiduciary by that fiduciary)	
	CINTHIA GONZALEZ QUINTEROS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	