

P21000103866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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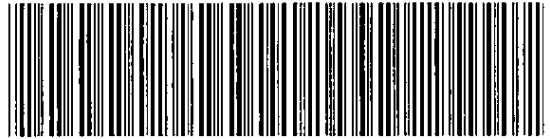
(Business Entity Name)

(Document Number)

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S. CHATHAM

AUG - 8 2023

2023 JUN - 6 PM 4:00

PM 4:00

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALEXA TIRES & REPAIRS, INC.

DOCUMENT NUMBER: P21000103866

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

Please return all correspondence concerning this matter to the following:

RUBEN E. DORTA
Name of Contact Person
RUBEN E. DORTA PA
Firm/ Company
6011 W 16 AVENUE
Address
HALEAH, FL 33012
City/ State and Zip Code
RDORTA@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUBEN E. DORTA at (305) 557-3332
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

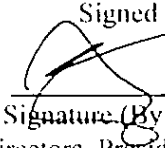
Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

The amendment(s) was/were adopted by the incorporators without shareholder action and

shareholder action was not required.

Signed this 30 day of MAY, 2023.



Signature (By the Chairman or Vice Chairman of the Board
Of Directors, President or other officer if adopted by the Shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

YOVANY CONTRERAS ZALDIVAR

Typed or printed name

President/Director

Title

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.0501 to 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.


1. The name of the Corporation is: **ALEXA TIRES & REPAIRS, INC, a Florida corporation**
2. The name and address of the registered agent and office is:

YOVANY CONTRERAS ZALDIVAR
14421 N.W. 27 Avenue
Opa locka, FL 33054

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature

Dated


MAY 30, 2023