## P22000025413

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SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: # 1 Auto Source Inc					
DOCUMENT NUMBER: <u>PJ20000 25413</u>					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Steve Stewart Name of Contact Person					
# 1 Auto Source Inc					
12976 SW 35 CICCLE					
Ocala Florida 34473					
City/ State and Zip Code  Steven Kyng 310 9 amail. Com  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Steve Stewart at 350, 843-6319  Name of Contact Person Area Code & Daytime Telephone Number					
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:					
\$35 Filing Fee					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations					

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation

of

# 1 Auto Source Inc		
(Name of Corporation as currently file	ed with the Florida Dent, of State)	
P22000025413	, a military management of the contract of the	<b>2022</b> SE(
(Document Number of Cor	moration (if known)	
(17) Carrier Manuel of Con	polation (it known)	555 ×
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flori</i> its Articles of Incorporation:	ida Profit Corporation adopts the follo	<del></del>
A If any adian many and a sharp a	/	of S
A. If amending name, enter the new name of the corporation:	4 ( / 1	
	N/A	The Row
name must be distinguishable and contain the word "corporation," "comp "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pre "chartered," "professional association," or the abbreviation "P.A."		
B. Enter new principal office address, if applicable:	A/A	
(Principal office address MUST BE A STREET ADDRESS)		
		<del></del>
<del></del>		
C. Enter new mailing address, if applicable:	,	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	$\mathcal{N}/\mathcal{N}$	<del></del>
<u> </u>	/ V / A	
<del>-</del>	<del></del>	<del></del>
D. If amending the registered agent and/or registered office address i	n Florida, enter the name of the	
new registered agent and/or the new registered office address:	//	
Name of New Registered Agent	N/A	
(Florida street ac		<del></del>
(Fioriaa sirve) aa	iaressi	
New Registered Office Address:	, Florida	<del></del>
(City,	) G	Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. Tam familiar with a	and accent the abligations of the nasiti	(12)
The second secon	and the property of the position	****
Signature of New Registe	red 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> <u>Jo</u>	<u>ohn Doe</u>	
X Remove	<u>V</u> <u>N</u>	dike Jones	
X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		James Palsa	7734 Industrial Rd
Add			melbourne FL 3290L
Remove			
2) Change			
Add			<u></u>
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
(Attach anamonal sheets, y necessary). The speeger	
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	• • •
	<u> </u>
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
n ( / A	
/ > / * 1	
1	

. . . . . .

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block document's effective date on the Depar	k does not meet the applicable statutory filing requirements tment of State's records.	, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without sharehol	lder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffice	d by the shareholders. The number of votes east for the american for approval.	ndment(s)
	ed by the shareholders through voting groups. The following th voting group entitled to vote separately on the amendment	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
hy	<u> </u>	
	(voting group)	
selected, by	tor, president or other officer – if directors or officers have no y an incorporator – if in the hands of a receiver, trustee, or offiduciary by that fiduciary)	
	Steve Stewart (Typed or printed name of person signing)	
	Owner President (Title of person signing)	

. . . . . . .