P22000045156

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2 20/14/2025

COVER LETTER

. TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SEAN'S MOBILE	AUTO CARE INC.	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	DIONNE M. KELLIER, ESÇ	UIRE	
		Name of Contact Persor)
	SMART COUNSEL LLC		
•		Firm/ Company	
	101 NE 3RD AVENUE, SUI	TE 1500	
		Address	
	FORT LAUDERDALE, FL	33301	
		City/ State and Zip Code	2
	dionne@smart-counsel.com		
	-	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call: at (860-4680
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Amend	Address ment Section
	sion of Corporations Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N	V. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

SEAN'S MOBILE AUTO CARE INC.

(Name of Corporati	ion as currently filed with the Florida Dept. of State
P22000045156	
(Docur	ment Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
	The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co", A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable	e:
(Principal office address MUST BE A STREET ADI	DRESS)
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
D. If amending the registered agent and/or register	
new registered agent and/or the new registered	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	gistered Agent: I am familiar with and accept the obligations of the position.
receive decept the appointment as registered agent.	1 am jamiliar with and accept the obligations of the position.
Signe	ature of New Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (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 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>John</u>	<u> Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	SEAN CHANDLER	2719 Hollywood Blvd., #L-02
Add			Hollywood, FL 33020
Remove			
2) Change		***	
Add			
Remove 3) Change	<u> </u>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
,	
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y mm approxime, material (mm)	
	·

The date of eac date this docum		loption:	, if oth	her than the
Effective date i	f applicable:			
-		(no more than 90	0 days after amendment file date)	_
		lock does not meet the application partment of State's records.	table statutory filing requirements, this date will not be I	isted as the
Adoption of Ar	mendment(s)	(<u>CHECK ONE</u>)		
The amendm action was no		pted by the incorporators, or b	board of directors without shareholder action and sharehol	lder
		pted by the shareholders. The fficient for approval.	e number of votes cast for the amendment(s)	
			ough voting groups. The following statement vote separately on the amendment(s):	
"The n		for the amendment(s) was/wer	••	
by		(voting group)	."	
		(voting group)		
	7/5/22 Dated			
	Signature	Sean Chandler		
	selected		cer – if directors or officers have not been e hands of a receiver, trustee, or other court	
	:	Sean Chandler		
	-	(Typed or printed r	name of person signing)	
	:	President		

(Title of person signing)