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COVERLETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: THE DELGADO	BODY SHOP CORP.	
DOCUMENT NUMBE	R: P23000003925		
	Amendment and fee are su	bmitted for filing.	
Please return all correspo	indence concerning this ma	tter to the following:	
		YUNIER DELGIO	
_		Name of Contact Persor)
	ĐE	ELGADO BODY SHOP CO	PRP.
_		Firm/ Company	
		13479 NW 47TH AVE	
	 .	Address	
		OPA LOCKA FL 3305	4
_	-	City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	DELGAD	OOBODYSHOPCORP@GM	AAIL.COM
_	E-mail address: (to be us	sed for future annual report	notification
For further information c	oncerning this matter, pleas) 924-7186) de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
finclosed is a check for the	ne following amount made	payable to the Florida Depa	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amenc Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 issee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee § Monroe Street, Suite 810 ssee, F1, 32303

Articles of Amendment Articles of Incorporation of

THE DELGADO BODY SHOP CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P23d0000392	5		
(Document Numl	ber of Corporation (if k	nown)	
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this <i>Florida Profit Con</i>	poration adopts the following amendment	t(s) to
A. If amending name, enter the new name of the corporatio	<u>n:</u>		
DELGADO BODY SHOP COR	Р.	The new	
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co "chartered," "professional association," or the abbreviation "I	". A professional con	orporated" or the abbreviation "Corp.,"	ا ا س
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent		iter the name of the	
(Florid	da street address)		
New Registered Office Address:		Florida	
	(Cuy)	(Zip Code)	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	gent: iliar with and accept the	obligations of the position.	
Was PV	na Dank tawat tawa 1	· dominio	
Signature of N	ew Registered Agent, if	cnanging	
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 PSF 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.

r.xampie: - <u>X.</u> Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jor	n <u>es</u>	
X Add	<u>sv</u>	Sally Sm	<u>rith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
I) Change		_		
Add				
Remove				_
2) Change		_		
Add				_
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				<u>-</u>
5r Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

dvadditional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
	•
	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument a not contained in the amenoment issen.
	1/450
	

The date of each amendment(s) adoption:	than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	•
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.	ted as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	:r
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
4/05/2024 Dated	
Signature Fayour	
(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 (iduciary)	
YUNIER DELGADO MATURELL, SR.	
(Typed or printed name of person signing)	-
OWNER	

(Title of person signing)