Division of Corporations Electronic Filing Cover Sheet

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COR AMND/RESTATE/CORRECT OR O/D RESIGN FKTS AUTO BODY REPAIR CORP

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March 29, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FKTS AUTO BODY REPAIR CORP 545 W PARK DR APT 10 MIAMI, FL 33172US

SUBJECT: FXTS AUTO BODY REPAIR CORP

REF: P23000022119

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

This corporation is not filed as a benefit corporation. This amendment cannot include the amendment form for a benefit corporation please remove.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline FAX Aud. #: H23000118806

Regulatory Specialist II Supervisor Letter Number: 223A00007268

Articles of Amendment to Articles of Incorporation of

FKTS AUTO BODY REPAIR C	ORP	
(Name of Corporation as e	urrently filed with the Florids	Dept. of State)
P23000022119		
(Document Nu	umber of Corporation (if known) i
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this <i>Florida Profit Corpora</i> t	doniadopts the following amendment(s)
A. If amending name, enter the new name of the corporat	tion:	
		The new
name must be distinguishable and contain the word "corporati "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	Co". A professional corporat	on name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	
		· · · · · · · · · · · · · · · · · · ·
		-
		
C. Enter new mailing address, if applicable:		5
(Mailing address MAY BE A POST OFFICE BOX)		
	*	
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office as		e name of the
Name of New Registered Agent		
(Flo	ridu street addressi	
11 120	Am Street many east	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
		i
None Doubles and A. and Ottomas and C. and D. St. and D.		
New Registered Agent's Signature, if changing Registered , I hereby accept the appointment as registered agent. I am fun	<u>Acent:</u> niliar with and accent the obliga	viens of the position
	and	1
Torinir	See Hill see	
Signature of i	New Registered Agent, if change	ng
_		; 1
Check if applicable The smendment(s) interaction filed austropy to a 407 0130	3/11)/m) E 5	
The amendment(s) is/are being filed pursuant to s. 607,0120	J(11)(c), r.S.	

(Attach additional sheets, Please note the officer/di. P = President; V = Vice . Executive Officer; CFO = President, Treasurer, Dir Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove.	without to rector titl President Chief Fi rector wor in the foil was the co	ary, e by the first letter of the office title: for Treusurer: S= Secretary: D= Director: TR= Tr nancial Officer. If an officer/director holds more than ald he PTD, lowing manner. Currently John Doe is listed as the F proporation, Sally Smith is named the Y and S. These st	rustee; (one titi	G = Chairman or Clerk, CEO = Chief le, list the first letter of each office held.
Example: <u>X</u> Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{y}}$	Mike Jones		
_X Add	<u>sv</u>	Saliv Smith) !
Type of Action (Check One)	Title	<u>Name</u>	Addr	25
1) XX Change	<u>P</u>	FREDDY R MILLAN SALAZAR	545 W	EST PARK DR APT 10
Add			MIAN	H, FL, 33172
Remove				2027
2) Change	VP	FERNANDO J MILLAN TERAN	545 W	EST PARK DR APT 10
XX Add			МІЛМ	II, FL. 33172 မေ
Remove 3) Change	TREAS	KARELYS A PEDREANEZ HERNANDE	z	
XXX Add			545 W	EST PARK DR APT 10
Remove		; -	MIAM	I, FL. 33172
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)	
CHANGE TO PRESIDENT TO: FREDDY R MILLAN SALAZAR	
CHANGE VICE TO: FERNANDO J MH.LAN TERAN AND	1.2.
ADD. TREASURY: KARELYS A PEDREANEZ HERNANDEZ	
	2023
	<u>့</u>
	 :D
	<u></u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)	<u>s.</u>

The date of each amendment(s) adoption:	, if other 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 document's effective date on the Department of State's records.	date will not be justed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder ac action was not required.	non and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	1(8)
The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes east for the amendment(s) was/were sufficient for approval by	36 c. i scdč
(voting group)	 .⊃
03/27/2023 Dated	
Signature (Dya director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, dr other cou appointed fiduciary by that fiduciary)	<u>5</u>
Tenzando Milan Frakl	Millar
(Typed or printed name of person signing)	, ·
(Title of person signing)	
(true or berson signing)	