P23000037119

(Requestor's Name)
(Address)
(Address)
(1.00.000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(======,
(Document Number)
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09/06/23--01012--029 **35.00



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: KING MUFFLER	HOLLYWOOD INC		
	MBER: P23000037119			
The enclosed Artica	les of Amendment and fee are su	bmitted for filing.		
Please return all co	rrespondence concerning this ma	tter to the following:		
	Shimi Avni			
		Name of Contact Person)	
	KING MUFFLER HOLLYWOOD INC			
	Firm/ Company			
	901 N STATE RD 7			
		Address		
	Hollywood, FL 33021			
	City/ State and Zip Code			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informa	tion concerning this matter, pleas	se call:		523 SEP 57 (VI)
Shimi Avni		at (, 588-0001	
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number	<u> </u>
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	THE STATE
Mailing Address		Street	Address	

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

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

Articles of Amendment to Articles of Incorporation of

KING MUFFLER HOLLYWOOD INC.

KING MOFFLER HOLL I WOOD INC	
(Name of Corporation as currently	y filed with the Florida Dept. of State)
P23000037119	
(Document Number of	Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(
a. If amending name, enter the new name of the corporation:	
	The new
came must be distinguishable and contain the word "corporation." "corporation." "Corp." or Co.," or the designation "Corp." "Inc.," or "Co". A chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mailing dauress MAT BE A POST OF FICE BOX)	
If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
	- 1
(Florida stre	eet address)
New Registered Office Address:	Florida
	(City) (Zip Code)
	ता
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	egistered 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.

A Change	<u>P1</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Avni Shimi	5501 SW 8TH ST
Add			Plantation, FL 33317
X Remove			
2) Change	VP	SHEFA 72 GROUP LLC	3981 194TH LN
Add			Golden Beach, FL 33160
X Remove 3) Change	<u>P</u>	Buhbut Moshe	
X Add			8007 NW 75th Ave
Remove			Tamrac, FL 33321
4) Change			\$ 701. S
Add			
Remove			- 1
5) Change		_	<u> </u>
Add			
Remove			22. 5
6) Change			
Add			
Remove			

tach additional sheets, if necessary). (Be specific)	
	
· 	
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	, .
(y not appreciate, material non)	170 51:01
	<u> </u>
	5,5
	.724
	

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date wi	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action an	d shareholder
The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	eved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated 08/31/2023		
SignatureSh	imi Avni	_
selected,	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)	38 102
S	himi Avni	2023 SEI
_	(Typed or printed name of person signing)	
<u>P</u>	resident	
	(Title of person signing)	M IU: 24