

P92000003/72

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

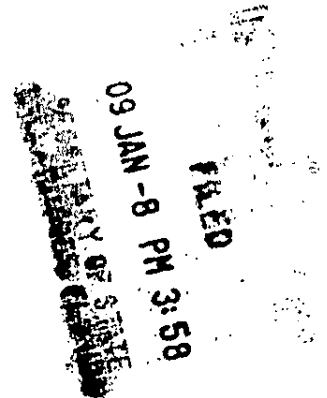
Office Use Only



400138715264

12/15/08--01016--019 **35.00

Amend



T. Roberts JAN -8 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2008

LEONARD NOVELLI
FRANK'S AUTO BODY, INC.
2655 N.E. 186TH STREET
NORTH MIAMI BEACH, FL 33180

SUBJECT: FRANK'S AUTO BODY, INC.
Ref. Number: P92000003172

We have received your document for FRANK'S AUTO BODY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 008A00060564

RECEIVED

2009 JAN -8 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Clifton Bldg
2661
Tall. Exec Ctr. Cir
32301

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FRANK'S AUTO BODY, INC +

DOCUMENT NUMBER: P92000003172 +

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LEONARD NOVELLI

(Name of Contact Person)

FRANK'S AUTO BODY, INC.

(Firm/ Company)

2655 N.E. 186th Street

(Address)

North Miami Beach, FL 33180

(City/ State and Zip Code)

For further information concerning this matter, please call:

Leonard Novelli

(Name of Contact Person)

at (954) 274-9753

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FRANK'S AUTO BODY, INC.

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

P92000003172

(Document Number of Corporation (if known))

FILED
09 JAN -8 PM 3:58
CLERK OF STATE

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Dade County Corporate Agents, Inc.

18901 N.E. 29th Avenue, Suite 100

New Registered Office Address:

(Florida street address)

Aventura, FL

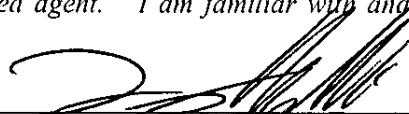
(City)

Florida 33180

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P/S	John Salera	2655 N.E. 186th Street North Miami Beach, FL 33180	☐ Add ☒ Remove
P/S	Leonard Novelli	2655 N.E. 186th Street North Miami Beach, FL	☒ Add ☐ Remove
			☐ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. 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)

The date of each amendment(s) adoption: September 18, 2008

Effective date if applicable:

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 cast for the amendment(s) was/were sufficient for approval

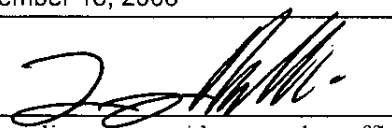
by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

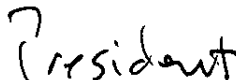
Dated September 18, 2008

Signature


(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 fiduciary)

Leonard Novelli

(Typed or printed name of person signing)



(Title of person signing)