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COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: P & J Tires and Towing, Inc. **DOCUMENT NUMBER:** P 92000008355 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pablo M Infante Jr Name of Contact Person P & J Tires and Towing, Inc. Firm/ Company 1927 N Washington Blvd Address Sarasota, FL 34237 City/ State and Zip Code fmarti85@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (941) 953-4853

Area Code & Daytime Telephone Number Pablo M Infante Jr Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □S43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section

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

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

Articles of Amendment to Articles of Incorporation of

P & J Tires and Towing, Inc.

(Name of Corporation as current) P62000008355	y filed with the Florida Dept. of State)
	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendr
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation"	
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation	
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 MAY BE A POST OFFICE BOX)	
, , <u></u>	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	vet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar v	
Thereby decept the appointment as registered agent. Tantjumatal s	um una accept inc omiguaons of the position.
Signature of New R	cgistered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, no 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; CEC Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of eacheld. President, Treasurer, Director would be <math>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. 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 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe				
X Remove	<u></u>	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	D	Pablo M Infante Sr	5360 Southerly Way			
Add X Remove			Sarasota, FL 34232			
2) Change	VP	Zoila A Palau	5360 Southerly Way			
X Add			Sarasota, FL 34232			
Remove						
3) X Change	P	Pablo M Infante Jr	5360 Southerly Way			
Add			Sarasota, FL 34232			
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

ttach additional sheets, if necessa	Articles, enter char ry). (Be specific)			
			 	
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		<u>.</u>		
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f an amendment provides for an	i exchange, reclassit	fication, or cancella	tion of issued share	<u>es.</u>
provisions for implementing the	amendment if not	contained in the an	iendment itself:	
(if not applicable, indicate N	/A)			
	-			

The date of each amendment(s) adoption:	_, if other the
date this document was signed.	
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 document's effective date on the Department of State's records.	not be listed
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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.	
9/25/2019 Dated	
Signature Pablo M. Arfante.	_
(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)	
Pablo M Infante	
(Typed or printed name of person signing)	
President	
(Title of person signing)	