P95000028904

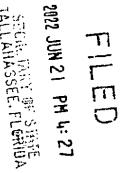
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:TOP LINE AUTO	SALES, INC.	
DOCUMENT NUM	MBER: P95000028904		
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	ANTHONY J. COMPAGNO)	
	·	Name of Contact Person	n
	PALM TREE AUTO SALES		
		Firm/ Company	
	6576 SE FEDERAL HWY	Time Company	
		Address	· · · · · · · · · · · · · · · · · · ·
	STUART, FL 34997		
		City/ State and Zip Cod	e
	PALMTREEAUTOSALES@	GMAIL.COM	
	E-mail address: (to be us	sed for future annual report	t notification)
For further information	tion concerning this matter, please	se call:	288-2099
Nan	ne of Contact Person	at (at Co	ode & Daytime Telephone Number
	for the following amount made		
\$35 Filing Fee	☐S43.75 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)
A D P	Tailing Address Imendment Section Division of Corporations O. Box 6327 allahassee, FL 32314	Amen Division The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

TOP LINE AUTO SALES, INC.	<u></u>	
(Name of Corporation as curre	ently filed with the Florida Dept. of State	<u>te</u>)
P95000028904		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the	following amendment(s)
A. If amending name, enter the new name of the corporation	<u>:</u>	
		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 "P.	'. A professional corporation name mu	bbreviation "Corp"
B. Enter new principal office address, if applicable:		7, 2
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		22,
		- 22 2 F
C. Enter new mailing address, if applicable:		me - rn
(Mailing address MAY BE A POST OFFICE BOX)		
		95
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add	address in Florida, enter the name of the ress:	<u>e</u>
Name of New Registered Agent		
Name by New Registered Agent		
(Florid	la street address)	
New Registered Office Address:	, Florid <i>(City)</i>	a(Zip Code)
	(3.5,7	. ,
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Agent's Signature, if changing Registered Regist	gent:	
I hereby accept the appointment as registered agent. I am famil	liar with and accept the obligations of the	position.
Signature of N	ew Registered Agent, if changing	
asgnature of tw	en negaterett agent, ij tuunging	
Check if applicable		
\square 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>D</u>	LUCILLE A. COMPAGNO	6576 SE Federal Hoy Stuast, FL 34997
Add			Stuast, FL 34997
X Remove 2) Change	V	JOHN COMPAGNO	6576 SE Federal Huy
Add			Stuart, FL 34997
X Remove Change			
Add			
Remove			2022 TALL
4) Change Add			THASE T
Remove			SCEP P
5) Change			FI - 2
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
			
	<u> </u>		
			· · · · ·
			
<u> </u>			
			2022 TAL
			A. J.
			121 136 138
		<u> </u>	
			PM 4:
	<u> </u>		
			•
		·	
			
			
f an amendment provides for an exc	hange, reclassification, or cance	llation of issued shares,	
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the	amenoment itseit:	
ty and appareunie, material confi			
	<u> </u>		

The date of each amendment(s) adoption:, if other than t 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 not be listed as t document's effective date on the Department of State's records.
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.
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.
must be separately provided for each voting group entitled to vote separately on the amendment(s):
by
by
(voting group)
Dated
Signature / C
(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)
ANTHONY J. COMPAGNO
(Typed or printed name of person signing)

PRESIDENT