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PICK-UP	☐ WAIT	. MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

P.O. Box 6327

Tallahassee, FL 32314

Space Coast Auto Liquidators, Inc. NAME OF CORPORATION: 097000022220 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Name of Contact Person

Space Coast Auto Liq., Inc.

Firm/Company

3119 Hwy 92E.

Address

Lakeland, FL 3380/

City/State and Zip Code Legiones @ Aol.Com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 863 ) 937-9134

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 & □\$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** Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to

	Articles of Incorporation	File
Space Coast Auto	Liquidators, Inc.	TALLAHASEY OF
	filed with the Florida Dept. of State)	rSECO SAN
P970000222	20	ALLAHASSY OF 10: 09
(Document Number o	of Corporation (if known)	SEE, FISTATE
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this <i>Florida Profit Corpora</i>	ion adopts the following amendment(s) to
A. If amending name, enter the new name of the o	corporation:	
		The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the B. Enter new principal office address, if applicable	p," "Inc," or "Co". A professional c e abbreviation "P.A."	
(Principal office address MUST BE A STREET AD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>ox</u> )	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		e name of the
Name of New Registered Agent	Ammy Wiley	
4	Oakridge Rd. (Florida street address)	
New Registered Office Address:	DAVENDORT F	orida <i>33837</i> _
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		gations of the position.
	May Willy	
Signature of N	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)

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.

Example: X Change	<u>PT</u> <u>J</u>	John Doe	
X Remove	<u>v</u> <u>r</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	Michael Wiley	6 DAKRIDGE Rd. DAVENPORT, FL 33837
Add			Davenport, FL 33837
Remove			
2) Change	PD	TAMMY WILEY	DAVENDORT, FL 33837
<u> </u>			DAVERPORT, FL 33837
Remove			
3 ) Change			<del>_</del>
Add			
Remove			
4) Change		<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			<del> </del>
6) Change			
Add			
Remove			

	onal sheets, if necessa	ıry). (Be speci	țic)		
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provisions fo	nent provides for an or implementing the oplicable, indicate N/2	amendment if i	essification, or contained in	ancellation of iss the amendment	ued shares, itself:
	· · · <u>-</u> · · · · · · · · · · · · · · · · · · ·			<del></del>	

The date of each amendment(s) adoption:	JANUARY 20, 2013
Effective date if applicable:	JANUARY 20, 2013 JANUARY 20, 2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (	CHECK ONE)
The amendment(s) was/were adopted by by the shareholders was/were sufficient to	the shareholders. The number of votes cast for the amendment(s) for approval.
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes cast for the a	mendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
action was not required.	the incorporators without shareholder action and shareholder
Dated 1- 20	-2013 hdll
Signature / [/ [/ ]/	
(By a director, p	oresident or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court
	iary by that fiduciary)
	Michael Wiley (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)