## 197000055088

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone #	<del>(</del> )
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations Jack's Economy Auto Painting of Southwest Florida, Inc. NAME OF CORPORATION: P97000055088 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kevin Lipscomb Name of Contact Person Jack's Economy Auto Painting of Southwest Florida, Inc. Firm/ Company 10940 K-Nine Dr. Address Bonita Springs, FL 34135 City/ State and Zip Code kevin@jackscollision.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kevin Lipscomb Area Code & Daytime Telephone Number Name of Contact Person 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 P.O. Box 6327 Clifton Building Taliahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

as currently filed with the Flor	ida Dept. of State)		
Number of Corporation (if known	wn)		,
atutes, this Florida Profit Corpo	pration adopts the folio	owing ame	ndment(s)
oration:			
		The	new
'corporation," "company," or "Inc," or "Co". A professiona previation "P.A."	"incorporated" or the corporation name m	ne abbrevi	iation
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office address in Florida, ente ice address;	r the name of the		
(Florida street address)			
	, Florida	(Zip Code)	
(City)			
	oration:  corporation, " "company," or "Inc," or "Co". A professional reviation "P.A."  SSS )  office address in Florida, entelee address;	corporation," "company," or "incorporated" or the line, " or "Co". A professional corporation name in reviation "P.A."  SSS )  office address in Florida, enter the name of the lice address;	atutes, this Florida Profit Corporation adopts the following ame oration:  The corporation, " "company," or "incorporated" or the abbreviation, " or "Co". A professional corporation name must contain reviation "P.A."  SSS)  office address in Florida, enter the name of the ice address:

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.

X Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Jack L. Lipscomb	5621 Solera Ct.
Add			Ft. Myers, FL 33919
X Remove			
2) X Change	PTSD	Kevin Lipscomb	1018 SW 23rd St.
Add			Cape Coral, FL 33991
Remove			
3 ) Change			
Add			
Remove			
4) Change		_	<u></u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pemove			

Attach <i>addition</i>	r adding additional Ai nal sheets, if necessary)	. (Be specific)			
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<u>provisions for</u>	ent provides for an exc implementing the am dicable, indicate N/A)	change, reclassifica rendment if not cor	ntion, or cancellation ntained in the ame	on of issued shares, adment itself:	·
				·	
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The date of each amendment		, if other than the
date this document was signed	11/22/17	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement addressed for each voting group entitled to vote separately on the amendment(s):	1
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated Signature _		
Se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	·
	Kevin Lipscomb	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	