P98000013886

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Special Instructions to Filing Officer:		
Office Use Only	,	



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COVER LETTER

TO: Amendment Section	;			
Division of Corporations	+			
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- NAME OF CORPORATION:	141311121	0110 Kaulo	and with	Carp
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DOCUMENT NUMBER:	0000000	000		_ ′

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 Body Shop Center LLC SON Firm/ Company Address FL 33/66 City/ State and Zip Code LIShop 2019 @ JMail. E-mail address: (to

For further information concerning this matter, please call:

at (Area Code & Davtime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: X \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$\$2,50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



2020 HAP 20 PH 3: 54

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2020

YUDORKI RAMIREZ 4213 SW 74 AVE MIAMI, FL 33155

SUBJECT: TRANSMISSION REPAIR & PARTS, CORP. Ref. Number: P98000013886

We have received your document for TRANSMISSION REPAIR & PARTS, CORP. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to file your document is \$35.

There is a balance due of \$10.00.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 320A00004039

www.sunbiz.org

Division of Comparation BO ROY 6207 Tallahangan Elasida 20214

(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 (Florida street address) New Registered Office Address: (City)	· · · · · ·			· .			
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a a second de la contra de					•		
New Redistered Agent's Nighture, if changing Registered Agent:	New Registered Agent's Signature, if chan	ging Registered Agent					
<u>New Registered Agent's Signature, if changing Registered Agent:</u> [hereby accept the appointment as registered agent.] [I am familiar with and accept the obligations of the position	I hereby accept the appointment as registered	l agent. I am familiar wit	h and accept the obligat	ions of the po	sition		

Signature of New Registered Agent, if changing

Check if applicable

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 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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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:		1	
<u>X</u> Change	<u>PT John</u>	Doe	
<u>X</u> Remove	<u>V</u> <u>Mike</u>	Jones	
<u>_X</u> Add	<u>SV Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>lec</u>	Yudorki Ramiret	<u>4213 SW 74 Ave</u> MIami, FC 33155
Add			<u> MIami, FC 33155</u>
Kemove		1	
2) Change		I	
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Remove		<u> </u>	
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4) Change			
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57 Change	<u> </u>		
Add			
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6) Change			
Add			
Remove			

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

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F. If an amendment provides for an exchange	reclassification, or cancellation of issued shares,
provisions for implementing the amendme	nt if not contained in the amendment itself:
(if not applicable, indicate N/A)	

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The date of each amendment(s) adoption date this document was signed.	on: 17/15/2019	, if other than the
Effective date <u>if applicable</u> :	<u> </u>	ile date)
Note: If the date inserted in this block d document's effective date on the Departm	loes not meet the applicable statutory filing requirent of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	,
The amendment(s) was/were adopted by action was not required.	by the incorporators, or board of directors without	shareholder action and shareholder
The amendment(s) was/were adopted t by the shareholders was/were sufficient	by the shareholders. The number of votes cast for nt for approval.	• the amendment(s)
	i by the shareholders through voting groups. The voting group entitled to vote separately on the an	
"The number of votes cast for the	e amendment(s) was/were sufficient for approval	
by	(voting group)	•
Dated		
Signature	hereit	
selected, by a	f. preparent or other officer - if directors or office an incorporator - if in the hands of a receiver, trus luciary by that fiduciary)	
~	Propher broketa	
	(Typed or printed name of person signing)	
	- TATA	<u></u>
	(Title of person signing)	
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