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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: L & G AUTO REI	PAIR		
DOCUMENT NUMB				
	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	spondence concerning this ma	atter to the following:		
	ERICK A. STANCEL			
		Name of Contact P	erson	
	L AND G AUTO REPAIR			
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	y	
	1580 40TH TER SW			
	Address			
	NAPLES. FLORIDA			
		City/ State and Zip	Code	
DNO	LIV2@HOTMAIL.COM		./	
	E-mail address: (to be u	sed for future annual re	port notification)	
For further information	concerning this matter, pleas	se call:		
ERICK A. STANCEL		239	784-7721	
Name of Contact Person		Are	a Code & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida l	Department of State:	
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ar Di Cl	reet Address nendment Section vision of Corporations ifton Building 61 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florid	da Dept. of State)	
G AUTO REPAIR, CORP. \$32287			
(Document Number	of Corporation (if know	m)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corpor	ration adopts the following amen	dment
A. If amending name, enter the new name of the corporation:		77	
name must be distinguishable and contain the word "corporati	ion," "company," or	The "incorporated" or the abbrevia	
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or	"Co". A professional		
word "chartered," "professional association," or the abbreviation		201 SI	
B. Enter new principal office address, if applicable:	N/A		est jug
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	· · · · · · · · · · · · · · · · · · ·	一门星	3 f
		77 -	
		30 - -	-
		m n	
C. Enter new mailing address, if applicable:	N/A	The second of	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		- FE 2	_
		•	
			
D. If amending the registered agent and/or registered office add	dress in Florida enter	the name of the	
new registered agent and/or the new registered office address		the name of the	
N/A			
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·	 	
(Florida s	street address)		
New Registered Office Address:		. Florida	
New Negaterea Office Address.	(City)	, Florida(Zip Code)	_
	•		
New Registered Agent's Signature, if changing Registered Agen	nt:		
I hereby accept the appointment as registered agent. I am familiar		ligations of the position,	
	-		

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: \underline{X} Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change	P	KAREN R. URQUIZA	1936 46TH ST SW
X Add			NAPLES, FL 34116
Remove			
2) Change	V	ERICK A. STANCEL	1936 46TH ST SW
X Add			NAPLES.FL 34116
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
N/A		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this l document's effective date on the Do	block does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amenda officient for approval.	nent(s)
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s).	atement :
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	opted by the board of directors without shareholder action and share opted by the incorporators without shareholder action and shareholder.	
action was not required.		
6-7-2019 Dated		
	Welver Jean	
selecte	irector, president or other officer – if directors or officers have not be d, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	
	NELVER LEON	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	