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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: COUNTYWIDE T	OWING & SALVAGE, IN	C.			
DOCUMENT NUMI						
	of Amendment and fee are su	abmitted for filing.				
Please return all corre	spondence concerning this ma	ntter to the following:				
	PERRY J. STAMOS					
		Name of Contact Person				
	COUNTYWIDE TOWING & SALVAGE, INC.					
		Firm/ Company				
	221 W OAKLAND PARK B	BOULEVARD				
		Address	.			
	FORT LAUDERDALE, FL.	33311				
		City/ State and Zip Code				
	BEVANS@BLSERVICEIN	C COM				
	•	sed for future annual report	notification)			
	13 111111 11111111111111111111111111111	ou with the distriction report	,			
For further informatio	n concerning this matter, pleas	se call:				
PERRY J. STAMOS		954 at (565-8900			
Name	of Contact Person	Area Coo	le & Daytime Telephone Number			
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	rtment of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address			Address			
	endment Section sion of Corporations	Amendment Section Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)

COUNTYWIDE TOWING & SALVAGE

Check if applicable

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

\$70499		7
	(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
N/A		The new
	Corp." "Inc," or "Co". \rightarrow	company," or "incorporated" or the abbreviation "Corp.," 1 professional corporation name must contain the word
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if appl	icable:	
(Mailing address MAY BE A POST		
D. If amending the registered agent ar new registered agent and/or the ne		
Name of New Registered Agent	PERRY J. STAMOS	•
Name of New Registered Agent	221 W OAKLAND PARK	BLVD.
	(Florida str	eet address)
New Registered Office Address:	FORT LAUDERDALE	, Florida ³³³¹¹
in the same test symmetric test control to the same test control test		(City) (Zip Code)
Now Designated Least's Signature if a	hansing Desigtaned Asset	
New Registered Agent's Signature, if of I hereby accept the appointment as registed.		i with and accept the obligations of the position.
	$\overline{}$	1,
7-	. 1	/// -
	Signature of New R	egistered Agent, if changing
	g	-0

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:					
$\frac{X}{X}$ 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>	<u>Name</u>	<u>Addres</u> s		
1) Change	VD	JOHN M. CAMILLO	221 W OAKLAND PARK BLVD.		
Add			FORT LAUDERDALE, FL 33311		
X Remove			/		
2) Change					
Add					
Remove Change					
Add			/		
Remove					
4) Change					
Add					
Remove					
5) Change		_ /			
Add	,				
Remove					
6) Change					
— Adul					
Remove					

. <u>If amending</u>	or adding additional Articles, enter cha-	nge(s) here:	
(Attach <i>additi</i>	onal sheets, if necessary). (Be specific)		
			/
	<u></u> .	-	<u> </u>
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	<i></i>		
lf an amendi	ment provides for an exchange, reclassif	fication, or cancellation of issued shares,	
provisions f	for implementing the amendment if not	contained in the amendment itself:	
(if not a	pplicable, indicate N/A)		
,			
			_
			
	· — — — — — — — — — — — — — — — — — — —		
			

The date of each amendment(s) adoption:	_, if other than the
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 a document's effective date on the Department of State's records.	iot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and staction was not required.	hareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by" (voting group)	
Dated	
(Signature)	
(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)	
PERRY J. STAMOS	
(Typed or printed name of person signing)	
VDS	
(Title of person signing)	