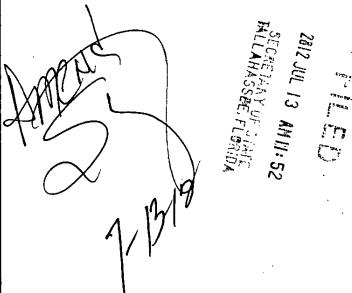


(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	,
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	Mark





07/13/12--01006--003 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Grayt	eal's	Aut.	smotive FAC
DOCUMENT NUMBER: Po				
The enclosed Articles of Amendm	ent and fee are sub	omitted for filin	g.	
Please return all correspondence co	oncerning this mat	ter to the follov	ving:	
	CAR	Z / S	glen	
	GRAY			
	4011 5	Firm/C Awyer	ompany Rd	
	SARA			
Email For further information concerning	address: (to be us	Sour ed for future an	nd Zip Code Ca nual report	notification)
Carl Zie	•		941	879 - 3878 de & Daytime Telephone Number
Name of Contact P				
Enclosed is a check for the following	ng amount made p	ayable to the F	lorida Depa	artment of State:
-	75 Filing Fee & ficate of Status	□\$43.75 Fili Certified C (Additional enclosed)	ору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

	Articles of Am	endment		_
	to		# O	, 5
	Articles of Inco	rporation	بردر	
		~ · ~	7	# F =
(TRAY DEA	1's Autom	olive, INC	7	<u> </u>
(Name of Corporation as o	currently filed with the Flo	rida Dept. of State)	ັກ ຮຸຮັ	
P000000				1일 를 1의 를
(Document	Number of Corporation (if	known)	Ţ,	en en
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this F	lorida Profit Corporation a	adopts the following	amendment(s) to
A. If amending name, enter the new name	ne of the corporation:			
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or " ${\mathcal C}$	o". A professional corpor	orated" or the abb	
B. Enter new principal office address, if (Principal office address MUST BE A ST.				
(Trincipal dyfice dualess <u>most be 7181</u>	<u>REEL ADDRESS</u>)			
	-			
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O				ì
D. If amending the registered agent and		ss in Florida, enter the na	me of the	٠
new registered agent and/or the new		•		
Name of New Registered Agent	CAR Zi	egler	_	
	CAR 21.	yer Rd.	_	
	(Florida stree			
New Registered Office Address:	SARASOT	, Florida	34255	
<u> </u>	(City)	, , , , , , , , , , , , , , , , ,	(Zip Code)	
New Registered Agent's Signature, if ch	anging Pagistared Agents			
I hereby accept the appointment as register		th and accept the obligation	ns of the position.	
	CV/II/Px	eschart		
Sign	nature of New Begistered Ag	gent, if changing	_	
3.6.		, , , , , , , , , , , , , , , , , , ,	,	

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 <math>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: XChange	PT John De	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	<u>ones</u>	
X Add	SV Sally Si	nit <u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change Add Remove	Pres	Paul D. Graybeal	1151 ANNIELAURIELAN SARBSOTA, FE 34240
2) Change Add Remove	PASS Sec.	Carl Ziegler	4011 Sawyer Rel SARASSIA, Fr. 34233
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove		•	
6) Change Add Remove		· · · · · · · · · · · · · · · · · · ·	

attach additional sheets, if necessary).	(Be specific)	
	ζ	
·.		-
provisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
(y noi applicable, indicale N/A)		
(y noi applicable, indicale N/A)		
(y noi applicable, indicale N/A)		
(y noi applicable, indicale N/A)		
(y noi applicable, indicale N/A)		

The date of each amendment(s) ac	option: 6 28 2013	<u> </u>
Effective date <u>if applicable</u> :	6/28/2013	2
	(no more than 90 days after	r amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of ficient for approval.	votes cast for the amendment(s)
	roved by the shareholders through voting each voting group entitled to vote separa	
"The number of votes cast	for the amendment(s) was/were sufficient	for approval
by	(voting group)	·"
•	(voting group)	
action was not required.	pted by the board of directors without shareholders by the incorporators without shareholders.	
Dated 6	28/2012	
Signature(By a d selecte	rector, president or other officer – if dire I, by an incorporator – if in the hands of a ed fiduciary by that fiduciary)	
	CAR 2 189 (Typed or printed name of per	ler reson signing)
	Preo/Sec	
Y	(Title of person signing)	