(Re	equestor's Name)	
(Address)		
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificate:	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section
• Division of Corporations

NAME OF CORPO	ORATION:	ANCAR 17 LIMOUSINE CO	ORP.		
DOCUMENT NUM	UMENT NUMBER: P05000030890				
The enclosed Article	es of Amendment and fee a	are submitted for filing.			
Please return all cor	respondence concerning th	is matter to the following:			
_		NICK ANDRADE			
	Ŋ	Name of Contact Person			
_	ANCAR	R 17 LIMOUSINE CORP.			
	Firm/ Company				
	14613 SW 95TH LANE				
	140	Address			
	,	•			
		MIMI, FL 33186			
_	C	City/ State and Zip Code			
	E-mail address: (to be use	ed for future annual report notification)			
For further informat	ion concerning this matter,	please call:			
NIC	CK ANDRADE	at (<u>305</u>) <u>33</u> Area Code & Daytime Tele	5-8855		
Name o	of Contact Person	Area Code & Daytime Tele	phone Number		
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	ment 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		Street Address			
Amendment			Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314			2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



IMOUSINE CORP.		-73
ntly filed with the Florida	Dept. of State)	
000030890		
ber of Corporation (if know	vn)	
, Florida Statutes, this <i>Flo</i>	orida Profit Corporation adopts the	following
the corporation:		
	The i	new
designation "Corp," "Inc,	" or "Co". A professional corporal	the ion
icable:		
<u>(ADDRESS</u>)		
	·-·-	
<u>E BOX</u>)		
	Florida, enter the name of the	
tered office address:		
,		
(Florida street a	ddress)	
(2.10.110.20.44.14.	,	
(0:)	, Florida	
(City)	(Zip Code)	
g Registered Agent:		
	nd accept the obligations of the position	<i>n</i> .
enature of New Registered	Agent, if changing	
	the corporation (if known, Florida Statutes, this Florida Statutes, this Florida Statutes, this Florida Statutes, this Florida Statutes, "Inc., designation "Corp." "Inc., designation	the corporation (if known) The interpolation (if known) The interpolation: The interpolation (if known) The interpolation

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	BEATRIZ ANDRADE	14613 SW 95TH LANE MIMI, FL 33186	
	ling or adding additional Articles, edditional sheets, if necessary). (Be s		
			
provisio	nendment provides for an exchange ons for implementing the amendmen of applicable, indicate N/A)		

The date of each amendmen	ıt(s) adoption: <u>01</u> /	/01/2010
Effective date if applicable:	04/04/0040	(date of adoption is required)
<u> </u>		0 days after amendment file date)
Adoption of Amendment(s)	(CH	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		e shareholders through voting groups. The following statemen group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amend	dment(s) was/were sufficient for approval
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
action was not required. The amendment(s) was/we action was not required. Dated 03/0	ere adopted by the	board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder
sel	y a director preside lected by an incorp pointed fiduciary b	ent or other officer – if directors or officers have not been corator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		NICK ANDRADE
	(Typ	ped or printed name of person signing)
		PRESIDENT
	(Title of	person signing)