P06000128166

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COVER LETTER

TO: Amendment Section Division of Corporations

	PENINGH	_A MOTORS IN	^		
NAME OF CORPORATION O	D0600012916		J.	_	
The enclosed Articles	of Amendment and fee are su	abmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	GUADALUPE D	ELGADO ARRIO	OLA		
		Name of Contact Perso	n		
	PENINSULA MO	TORS INC.			
		Firm/ Company			
	24141 S. DIXIE H	HWY.			
		Address			
	PRINCETON, FL	33032			
		City/ State and Zip Cod	e		
	ainaula matara	-141			
per	ninsula_motors@a			_	
	E-mail address: (to be u	sed for future annual report	notification)		
For further informatio	n concerning this matter, plea	se call:			
GUADALUP	E DELGADO AR	RIOLA at (305	, 258-9536		
	of Contact Person		de & Daytime Telephone N	umber	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	ALS I	
■ \$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)	14 OCT 17 PH 4: SEGREWESSEETS	
	iling Address		Address	-	
Amendment Section			Iment Section of Corporations	40	
Division of Corporations P.O. Box 6327			on of Corporations Building		
Tallahassee, FL 32314			Executive Center Circle		

Tallahassee, FL 32301

Articles of Incorporation of

PENINSULA MOTORS INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P06000128166	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following artist Articles of Incorporation:	nendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbr "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must con word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (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	
ALEC	<u> </u>
(Florida street address)	
New Registered Office Address: , Florida	- T
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	: 19
· · · · · · · · · · · · · · · · · · ·	
Signature of New Registered Agent, if changing	

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: 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	S	URIEL VEGA DELGADO	31279 SW 136 AVE
Add			APT. 263
Remove			HOMESTEAD, FL. 33033
2) Change			
Add			
Remove			***************************************
3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	
	· · · · · · · · · · · · · · · · · · ·
** · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	

The date of each amendment	t(s) adoption: OCTOBER 14, 2014	, if other than the
date this document was signed	OCTOBER 14, 2014	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/weby the shareholders was/weby	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_10/1	14/2014	
Signature	$\frac{1}{2}$	
•	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ppointed fiduciary by that fiduciary)	
	GUADALUPE DELGADO ARRIOLA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

FILED

14 OCT 17 PH I: 19

SECRETARISTER AND A