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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: A/C Auto Repair	Corp			
DOCUMENT NUMBER: P16000023305				
The enclosed Articles of Amendment and fee are so	ubmitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Camilo Santos Armas				
	Name of Contact Persor			
A/C Auto Repair Corp				
	Firm/ Company			
9460 NW 13 Street				
Address				
Miami FL 33172				
	City/ State and Zip Code	2		
comilosa01@gmail.com				
	sed for future annual report	notification)		
	•			
For further information concerning this matter, plea	se call:			
Camilo Santos Armas	786	792-1651		
Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

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A/C Auto Repair Corp

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(Name o	of Corporation as curren	tly filed with the Florid:	a Dept. of State)
P16000023305			
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corpora	tion adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional c	
B. Enter new principal office address,	if applicable:		
(Principal office address MUST BE A S			
			
			
C. Enter new mailing address, if appli			
(Mailing address MAY BE A POST)	<u>OFFICE BOX</u>)		
D. If amending the registered agent an	ud/or registered office add	tress in Florida, enter ti	he name of the
new registered agent and/or the new			ie name or the
Name of New Registered Agent	Camilo Santos Armas		
	9460 NW 13 Street		
	(Florida s	treet address)	<u> </u>
New Registered Office Address:	Miami		. Florida 33172
nen negmerea Office Address.	· · · · · · · · · · · · · · · · · · ·	(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen Iered agent. I am familiar	<u>t:</u> with and accept the obli	gations of the position.
	A.A		garacian of the position.
	NUI/2		
	<u> </u>	B	
	Signature of New	Registered Agent, if char	iging

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.

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	PST	Carlos Garcia	9460 NW 13 Street
Add			Bay 69
X Remove			Miami FL 33172
2) Change	PST	Camilo Santos Armas	9460 NW 13 Street
x Add			Miami FL 33172
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	
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	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument if not contained in the amendment user.

	September 1, 2017	
The date of each amendment date this document was signed		, if other than the
Effective date <u>if applicable</u> :	September 1, 2017	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	ot be listed as the
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 and for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Augu Dated	st 17, 2017	
Signature	(C1) z	
(B	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	Camilo Santos Armas	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	