P1800033014

		
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SECRETARY OF STATE

C. GOLDEN
JUN 1 2 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GREAT MOTORS	S AUTO SALES CORP		
DOCUMENT NUM	P48000033044		, , , , , , , , , , , , , , , , , , ,	
The enclosed Articles	of Amendment and fee are su	shmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	ALCINO J VIEIRA			
		Name of Contact Person	1	
	GREAT MOTORS AUTO S	ALES CORP		
		Firm/ Company		
	17254 NW 7TH ST			
		Address		
	PEMBROKE PINES FL 330	29		
		City/ State and Zip Cod	· ·	
alcin	ovb@gmail.com			
	E-mail address; (to be u	sed for future annual report	notification)	
For further information	m concerning this matter, pleas	se call:		
ALCINO J VIEIRA		786	899-6558	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Dep:	urtment of State:	
S35 Filing Fee	□843.75 Filing Fee & Certificate of Status	□843.75 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		Street Address Amendment Section Division of Corporations		
0.9	. Box 6327	Clifton Building		
Tal	lahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

2010 JUN 11 PM 4: 56

GREAT MOTORS AUTO SALES CORP (Name of Corporation as currently filed with the Florida Dept. WALLAHASSEE, FLORIDA P18000033014 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: 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 abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET_(DDRESS) 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 (Florida street address) New Registered Office Address: __ 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.

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>b.t.</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	S	MARTIN A RODRIGUEZ LOPEZ	17254 NW 7TH ST
Add			PEMBROKE PINES, FL 33029
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	 		
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change		-	
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)		
	<u> </u>		
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If an amendment provides for an exch	ange, reclassification, or	cancellation of issued s	dares.
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in	<u>i the amendment itsell</u>	<u>:</u>
A			
			· · · · · · · · · · · · · · · · · · ·
			

	05/30/2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
	.0/2018	
Effective date <u>if applicable</u> :	tno more than 90 days after amendi	nent file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing partment of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes conflicient for approval.	ist for the amendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups, each voting group entitled to vote separately on t	The following statement he amendmentis):
"The number of votes cas	for the amendment(s) was/were sufficient for appr	roval
by	(voting group)	··
	(voting group)	
☐ The amendment(s) was/were action was not required.	opted by the board of directors without shareholde	r action and shareholder
The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder act	ion and shareholder
05/30/201 Dated	Many	
select	lirector, president or other officer – if directors or ad, by an incorporator – if in the hands of a receive need fiduciary by that fiduciary)	
	ALCINO J VIEIRA	
	(Typed or printed name of person sign	ning)
	PRESIDENT	
	(Title of person signing)	