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15 JUL 29 AHTH: 10

AVISION OF CORRESPANISHS

Anne

JUL 29 2015 D CONNELL

COVER LETTER

NAME OF CORPORATION: 27 Auto Sales inc of Leon

DOCUMENT NUMBER: P97000042795

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wafa CISaka

Name of Contact Person

27 Auto Sales inc of Leon

Firm/Company

3115 Apallaches Parkway

Address

Tallahassee N 3 2 311

City/State and Zip Code

Wafa199 Vahoe - com / audox Mokeek & Yahoo · com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wafa Elsaka

Name of Contact Person

Area Code & Daytime Telephone Number

\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Mailing Address

□ \$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐S43.75 Filing Fee & Certificate of Status

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

15 MI 29 AMILED **Articles of Amendment Articles of Incorporation** (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 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 (Florida street address) New Registered Office Address: . Florida (Citv) (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. 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:

tAttach 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 Doc		
X Remove	<u>v</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	P	Ahmed ElSaka	3115 Afallachee Pakul Tallahassee, 7/1323	
Add	•		Tallahassee, 121323	
_X_Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add			- With a second	
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)	

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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
provisions for implementing the ame	ndment if not contained in the amendment itself:	
provisions for implementing the ame	ndment if not contained in the amendment itself:	
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provisions for implementing the ame	ndment if not contained in the amendment itself:	

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 7/29/15
Signature (By a director president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Wafa ElSaka (Typed or printed name of person signing)
President
(Title of person signing)