163852

| (Requestor's Name) |
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| |
| · (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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ALLAHASSEE EIGHE

hospital states

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORP | ORATION: | lim Douglas Chevrolet Co. | , Inc. |
|------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| DOCUMENT NUI | MBER: | 163852 | |
| The enclosed Articl | les of Amendment and fee a | re submitted for filing. | |
| Please return all con | rrespondence concerning thi | s matter to the following: | |
| _ | | J. Tompkins, Esquire | |
| | N | ame of Contact Person | |
| _ | Darr | yl J. Tompkins, P.A. | |
| | | Firm/ Company | |
| | | P. O. Box 519 | |
| - | | Address | |
| | Ala | chua, Florida 32615 | |
| - | C | ity/ State and Zip Code | |
| | djtompkin E-mail address: (to be use | s@windstream.net d for future annual report notification) | <u></u> |
| For further informa | ation concerning this matter, | please call: | |
| Da | rryl J. Tompkins | ~ ~ \ | 18-1000 |
| Name | of Contact Person | Area Code & Daytime Tel | ephone Number |
| Enclosed is a check | for the following amount n | nade payable to the Florida Depart | tment of State: |
| S35 Filing Fee | \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 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 | | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl | le |
| | | Tallahassee, FL 32301 | |

Articles of Amendment to Articles of Incorporation of

| Jim Douglas Chevrolet Co., Inc. | |
|------------------------------------------------------------------------|-----------|
| (Name of Corporation as corrently filed with the Florida Dept. of Stat | <u>e)</u> |
| 163852 | |
| (Document Number of Companion (if known) | |

| (Mame of Corporation as curren | itty ined with the Florida Dep | t. or State | |
|------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------|--------------------|
| 1 | 63852 | | |
| (Document Numb | per of Corporation (if known) | | |
| Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation: | , Florida Statutes, this Florida | Profit Corporation | adopts the followi |
| A. If amending name, enter the new name of | the corporation: | | |
| Jim Douglas S | ales and Service, Inc. | | The new |
| name must be distinguishable and contain th | ne word "corporation," "com | pany," or "incorpo | rated" or the |
| abbreviation "Corp.," "Inc.," or Co.," or the c | designation "Corp," "Inc," or | "Co". A profession | al corporation |
| name must contain the word "chartered," "profe | essional association," or the ab | obreviation "P.A." | |
| B. Enter new principal office address, if appli | cable: | | |
| (Principal office address MUST BE A STREET | ADDRESS) | : | 75.0 |
| | <u> </u> | · · · · · · · · · · · · · · · · · · · | |
| | | ; | |
| | | | - N - E |
| C. Enter new mailing address, if applicable: | | : | SECTION I |
| (Mailing address MAY BE A POST OFFIC | <u></u> | | |
| | | : | - Si - |
| | | | |
| | | | Dmi J |
| D. If amending the registered agent and/or re | egistered office address in Flor | ida, enter the name | of the |
| new registered agent and/or the new regis | tered office address: | | |
| 227 70 | | | |
| Name of New Registered Agent: | | <u> </u> | |
| | | | |
| New Registered Office Address: | (Florida street addres | rs) | |
| | | | |
| - | (C:+.) | , Florida (Zip Code) | |
| | (City) | (Lip Coue) | |
| New Registered Agent's Signature, if changin | g Registered Agent: | | |
| I hereby accept the appointment as registered as | | cept 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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|----------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------|
| PD | Baxter Forrester | P. O. Box 723, S. US 441 High Springs, FL 32655 | |
| <u>VD</u> | Mary D. Forrester | P. O. Box 723, S. US 441 High Springs, FL 32655 | □ Add ☑ Remove |
| _VPD | Ray Forrester | P. O. Box 723, S. US 441 High Springs, FL 32655 | |
| | ding or adding additional Article dditional sheets, if necessary). (I | s, enter change(s) here: Be specific) | |
| | | | |
| | | | |
| <u>provisi</u> | nendment provides for an excharons for implementing the amendate of applicable, indicate N/A) | nge, reclassification, or cancellation of i ment if not contained in the amendmen | issued sbares, t itself: |
| | | | |
| | | | *** |
| | | | |

Officers and/or Directors Change

| TITLE | <u>NAME</u> | <u>ADDRESS</u> | TYPE OF ACTION |
|-------|--------------------|----------------------------------------------------|----------------|
| PD | James P. Forrester | P. O. Box 723, S. US 441 High Springs, FL 32655 | ADD |
| STD | Brenda Forrester | P. O. Box 723, S. US 441 High Springs, FL 32655 | ADD |

| The date of each amendmen | t(s) adoption: June 11, 2009 |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date <u>if applicable</u> : | |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | exe approved by the shareholders through voting groups. The following statement and 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 |
| ъу | (voting group) |
| The amendment(s) was/we action was not required. | ere 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(| 1A109 N Q-9 |
| Signature | Jones Towester |
| | y a director, president or other officer – if directors or officers have not been |
| | edted, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | James P. Forrester |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |