439060

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: PROIA MOTORS,	INC.	
DOCUMENT NU			
	les of Amendment and fee are sub	omitted for filing.	
Please return all co	rrespondence concerning this mat	ter to the following:	
	George H. Knott, Esq.		
		Name of Contact Person	1
	Knott Ebelini Hart		
		Firm/ Company	
	1625 Hendry Street, Suite 301	• •	
		Address	
	Fort Myers, Florida 3390		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	ę
	mrv6@aol.com		
		ed for future annual report	notification)
For further informa George H. Knott	tion concerning this matter, pleas	230) 334-2722
Nan	ne of Contact Person	at (Area Co	de & Daytime Telephone Number
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□ \$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 The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PROIA MOTORS, INC.		
	n as currently filed with the Florida Dept. of State)	
439060		
(Documen	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following	g amendment(s)
A. If amending name, enter the new name of the corp	poration:	
N/A		The new
	poration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must containation "P.A."	on "Corp.,"
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR	RESS)	
		- 3 -
		<u></u>
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	/) <u>N/A</u>	
		<u> </u>
		 -
D. If amending the registered agent and/or registered		**
new registered agent and/or the new registered off	ffice address:	
Name of New Registered Agent N/A		_
	(Florida street address)	-
New Registered Office Address:	. Fłorida	
	(City) (Zip C	ode)
N. B. C. J. M. W. J. C. L. B. L.		
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	stered Agent: am familiar with and accept the obligations of the position.	
	, , ,	
		-
Signatu	ure of New Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Gary Proia	4105 Fowler Street
Add			Fort Myers, Florida 33901
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		· · · · · · · · · · · · · · · · · · ·	_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Article VII of the Articles of Incorporation are amended to reduce the number of Directors from three (3) to one (1).	E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
		
· · · · · · · · · · · · · · · · · · ·		
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	(if not applicable, indicate N/A)	
N/A	N/A	
		

The date of each amendment(s date this document was signed.) adoption:	, if other than the
Ţ.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Notes 16 the data incomed in thi	, ,	abia dan will and be Barra an abi
document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehold	der action and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amer sufficient for approval.	ndment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment(
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
D	9 2 2 2 4	
Dated	9-20-21	
Signature	de Put	
(By:	a director, president or other officer - if directors or officers have no	
	cted, by an incorporator – if in the hands of a receiver, trustee, or otlointed fiduciary by that fiduciary)	her court
	Gino Proia	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	