K29614

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	<u>+</u>
(C.	.,. O. Latto, M., p. 11. 11. 11.	,
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FILEO SECRETARY OF STATE DIVISION OF CORPORATIONS

JUN 28 2016 C LEWIS

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	on: <u>O'NEL'</u> S	S USEO CARS	
DOCUMENT NUMBER:	K 29614		
The enclosed Articles of Am	endment and fee are su	bmitted for filing.	
Please return all corresponde	ence concerning this mat	tter to the following:	
	SCOTT R	ONEIL Name of Contact Person	1
0		OARS Firm/ Company	
		Firm/ Company	
	721 N US H		
		Address	
_TH	ONOTOSASSA	FL 33592	
		City/ State and Zip Code	е
_EON	JEIL 10 TAMI	PABAY I RR. CC	om
r	z-man aduress: (to be us	ca for faute annual report	nouncation)
For further information conc	erning this matter, pleas	e call:	
SCOTT RO	NEIL	at (813	131-8966
Name of Con	tact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made p	payable to the Florida Depa	artment of State:
₩ \$35 Filing Fee C	343.75 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 A	ddress	Street	Address

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

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

Articles of Amendment to Articles of Incorporation of



onis IIIN 23 PM 3: 32

	2016 JUN 23 PH 3- 32
(Name of Corporatio	on as currently filed with the Florida Dept. of State)
O'NEIL USED CARS, I	SDOC#K29614
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cou	rporatien:
	The new
	I "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable:	\sim
(Mailing address MAY BE A POST OFFICE BOX	K)
D. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent: I am familiar with and accept the obligations of the position.
1 петеоу ассері іне арронитені as regisieren ageni.	ат затива мин ини иссері те обидинонь од те розінон.
Signa	ature 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	PT Jo	hn Doe	
X Remove	<u>v</u> <u>m</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	ELAINE O'NEIL	11721 N US HWY 301
Add			THONO 105 A 55 A
Remove			FL 33592
2) Change			
Add			
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).	(Be specific)
X	
f an amendment provides for an exchorovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
/ V	

The date of each amendment(s) adoption:	6-20 - 2016	, if other than the
date this document was signed.		FILLU SCOPETARY OF STATE
Effective date <u>if applicable</u> :	6-20 - 2015 (no more than 90 days after amendn	SECRETARY OF STATE DIVISION OF CORPORATION:
	(no more than 90 days after amenda	nent file date) 2016 JUN 23 PM 3: 32
Note: If the date inserted in this block does not document's effective date on the Department of S		requirements, this date will not be listed as the
Adoption of Amendment(s) (CHI	ECK ONE)	
☐ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap		st for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting a		
"The number of votes cast for the amend	dment(s) was/were sufficient for appr	oval
by	ng group)	,,
(voti	ing group)	
The amendment(s) was/were adopted by the baction was not required.	poard of directors without shareholder	action and shareholder
The amendment(s) was/were adopted by the is action was not required.	ncorporators without shareholder acti	on and shareholder.
Dated 6-20	- 2016	
Dated 6-20 - Signature	p Ohn PRESIDE	aT.
(By a director, president)	dent or other officer – if directors or o	
selected, by an incor appointed fiduciary	rporator – if in the hands of a receiver by that fiduciary)	, trustee, or other court
<u> 500-</u>	TY R ONEIL Typed or printed name of person sign	
C	Typed or printed name of person sign	ing)
	PRESIDENT	
	(Title of person signing)	