K69410

(Re	questor's Name)	
/Ad	dress)	
PΑ	aless)	
	dress)	
(Ad	aress)	
(Cit	ry/State/Zip/Phone	e #1)
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PICK-UP	☐ WAIT	MAIL
—————(Bu	siness Entity Nar	me)
(Do	cument Number))
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: CAR-COR, INC.		· .
DOCUMENT NUM	IBER: K69410		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Michael Pardo		
		Name of Contact Person	1
	Pardo Jackson Gainsburg, PL		
		Firm/ Company	
	200 SE First Street, Suite 700	1	
		Address	
	Miami, FL 33131		
		City/ State and Zip Cod	e
	mpardo@pardojackson.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Michael Pardo		at (305	358-1001
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.	nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Division The C 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

CAR-COR, INC.				
(Name o	of Corporation as currently	filed with the Florida Der	ot. of State)	
K69410				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this I	Florida Profit Corporation a	adopts the following ame	endment(s) to
A. If amending name, enter the new na	ame of the corporation:			
N/A			The	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	lorp," "Inc," or "Co". A		" or the abbreviation "Co	orp.,"
B. Enter new principal office address, if applicable:		N/A		
(Principal office address MUST BE A S			, 	
		-		
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		N/A		
(Maning dadress MATT BL ATOST	OTTICE BOA			
			5 2	
			2020 311	
D. If amending the registered agent an	ıd/or registered office addr	ess in Florida, enter the na	ame of the	
new registered agent and/or the new	w registered office address		65 59	
Name of New Registered Agent	N/A			•
			3 60	
	(Florida str	zet address)		
New Registered Office Address:			. Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	<mark>hanging Registered Agent:</mark> ered agent. I am familiar v	vith and accept the obligatio	ns of the position.	
	Signature of New P.	egistered Agent, if changing		
	inghalare of free Re	garerea agent, y endaging		
Check if annlicable				

☐ 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 Remove	<u>v</u>	Mike Jones	
			•
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	Aubrey Reiter	724 NE 79th Street
Add			Miami, Florida 33138
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)		
I/A 		
	· · · · · · · · · · · · · · · · · · ·	
		
<u></u>		
	·	
 -		
16		
<u>ii an</u> pro	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:	
-	(if not applicable, indicate N/A)	
/A		
		

The date of each amendment(s date this document was signed.	adoption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	······································
	(voting group)
October Dated Signature	19, 2020 in Stuly
(By a selec	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Carli Shekels
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)