## M61737

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SECRETARY OF STATE

APR 3 0 2014

C. CARROTHERS

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: AUTOS B BER: M67737	SY DAVE, INC	
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
	DAVID TINKER	3	
	AUTOS BY DA	Name of Contact Person	1
	6521 N 9TH A	Firm/ Company  VE	
	PENSACOLA I	Address FL 32504	
		City/ State and Zip Code	e
For further information	E-mail address: (to be us on concerning this matter, pleas	sed for future annual report se call:	notilication)
DAVID TIN	IKER	at (850	, 476-8666
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	nrtment of State:
■ \$35 Filing Fee TO: FLORIDA DEPT.J STATE	□\$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)
Am Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## AUTOS BY DAVE, INC.

	currently filed with the Florida Dept. of State)	
	M67737	75 25 25 25 25 25 25 25 25 25 25 25 25 25
(Document)	Number of Corporation (if known)	- C.
ursuant to the provisions of section 607.10 Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following	HAMSEE HAMSEE
If amending name, enter the new nam	ne of the corporation:	. F L O A
me must be distinguishable and contai forp.," "Inc.," or Co.," or the designat ord "chartered," "professional association	in the word "corporation." "company," or "incorporated" or the ab- tion "Corp," "Inc," or "Co". A professional corporation name must c on," or the abbreviation "P.A."	bresta contain
Enter new principal office address, if rincipal office address <u>MUST BE A STI</u>	applicable: REET ADDRESS )	
Enter new mailing address, if applica (Mailing address MAY BE A POST Of	able: FFICE BOX	
	or registered office address in Florida, enter the name of the	
new registered agent and/or the new		
If amending the registered agent and/ new registered agent and/or the new in Name of New Registered Agent	registered office address:	
new registered agent and/or the new		

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	<u></u>		STEPHEN KEHOE	6521 N 9TH AVE
Add				
Remove				PENSACOLA FL 32504
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
	<u> </u>
M. M. M. Marine and C.	
If an amendment provides for an exchiprovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
<del></del>	

The date of each amendment(s) add	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoptaction was not required.	sted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	oted by the incorporators without shareholder action and shareholder	
Dated APRIL 2	0. 2015	
Signature/	2 Fil	
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)	
[	DAVID TINKER	
<del>-</del>	(Typed or printed name of person signing)	
Γ	DIRECTOR / PRESIDENT	
_	(Title of person signing)	