# P0000008660/

(Re	equestor's Name)
(Ad	ldress)
(Ad	ldress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Document Number)	
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

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SECRETARY OF STATE
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### COVER LETTER,

. TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORE	PORATION: Smal	t Buy Auto Carl	D
DOCUMENT NU	MBER: 1000	00086601	· · · · · · · · · · · · · · · · · · ·
The enclosed Artic	les of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		ame of Contact Person	<del></del>
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	પ્	SNE 6 52. Address	<del> </del>
	Mic C	ity/ State and Zip Code	
	E-mail address: (to be use	d for future annual report notification)	<del></del>
For further informa	ation concerning this matter,	please call:	
	el Claude Sc. of Contact Person	at ( 305 ) 300 — Area Code & Daytime Te	
Enclosed is a check	c for the following amount m	ade payable to the Florida Depar	tment of State:
■\$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 Ac Amendmen Division of		Street Address Amendment Section Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle



February 25, 2010

LIONEL CLAUDE JR

46 NE 6 STREET MIAMI, FL 33132

SUBJECT: SMART BUY AUTO CORP.

Ref. Number: P00000086601

We have received your document for SMART BUY AUTO CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P97000017266 - CCO, INC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 810A00004701

Teresa Brown Regulatory Specialist II

Nivision of Compositions D.O. DOV 6997 Well-barrer Plant de 9991

## **Articles of Amendment**

Articles of Incorporation of	2010 MAR ILES		
SMART BUY AUTO CORP.	TALEORETA SAL		
(Name of Corporation as currently filed with the Florida Dept. of State)			
SMART ISUY AUTO CORP POODOO	0860 (5.75)		
(Document Number of Corporation (if known)	RIDA		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:			

A. If amending name, enter the new name of the corporation: C-Co. International name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept 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
***			· · · · · · · · · · · · · · · · · · ·
	nding or adding additional Articles, en additional sheets, if necessary). (Be sp		
provis	mendment provides for an exchange, ions for implementing the amendmen not applicable, indicate N/A)		
······································	***************************************		
	***************************************		

The date of each amendment	t(s) adoption: $3-5-10$
、 ◆	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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
by	
•	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
·	3/5/10
(By sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)
	(Title of person signing)