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12 JUN 13 AM 9:51



JUN 1 4 2012

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations	`
NAME OF CORPORATION: DOCUMENT NUMBER:	CION 1 AUTO SOLES INC.
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
· · · · · · · · · · · · · · · · · · ·	Name of Contact Person
	205 SE 10th avenue
	Address HOWAN, PL 33010 City/ State and Zip Code
E-mail address: (to be u	SIGO W JOHN OM Ised for future annual report notification)
For further information concerning this matter, plea	ase call:
Marie of Contact Person	at (305 Q84-1848 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	· · ·
\$35 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

OIVISION OF CORPORATION
12 JUN 13 AM 9:51

Articles of Ar	nendment	12 JUN 13
to Articl e s of Inc	orporation	7.0
ACCION 1 PUTO	Salvs INC	
(Name of Corporation as currently filed with the Fl	orida Dept. of State)	
103000 10	1213	
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Torida Profit Corporation adopts	the following amendment(s)
A. If amending name, enter the new name of the corporation:		
•		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
(Frincipul office uturess <u>MOST BE A STREET ADDRESS</u>)	-	
•		
		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		
		
D. If amending the registered agent and/or registered office address	ss in Florida, enter the name of	<u>the</u>
new registered agent and/or the new registered office address:	_	
Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address: (City)	, Florida	Zin Code)
(2.19)	1~	np comey
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of th	ne position.
Signature of New Registered Ag	vent, 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)

Evample:

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	PT Joh	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
_X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	Λδ	Raul Sosa	<u>226 Pinecco</u> T Drive Mianu Springs, PL 33166
2) Change Add Remove		 	<i>σω</i> (φ)
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			· · · · · · · · · · · · · · · · · · ·
6) Change Add Remove			

amending or adding additional stach additional sheets, if necessary	ıry). (Be specific	<i>y</i>		
			<u> </u>	
<u> </u>				- +
·		<u> </u>	- 	
				
n amendment provides for an eovisions for implementing the second (if not applicable, indicate N/A)	exchange, reclassi amendment if not	fication, or canc contained in the	elistion of issued amendment itse	l shares, lf:
				
·				

The date of each amendment(s) adoption:	5/3/12012
Effective date if applicable:	5/3/12012
Effective date it applicable.	(no more than 90 days after amendment file date)
•	
Adoption of Amendment(s) (Cl	HECK ONE)
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
	se shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval
by	
(vo	ting group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated	31/2012
Signature X)
	ident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court by by that fiduciary)
	Mura basa
	(Typed or printed name of person signing)
·	Mundent
	(Title of person signing)