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COVER LETTER

*	2	EGVER ELITER	
TO: Amendment S Division of Co		•	
NAME OF CORP	oration: Harold	Michaels Autos, In) <u>C</u> 1
DOCUMENT NU	mber: <u>P0500</u>	DU03398	
The enclosed Article	les of Amendment and fee a	re submitted for filing.	
Please return all con	rrespondence concerning thi	s matter to the following:	
-	Harold Jo	MnSln ame of Contact Person	,
-		Firm/ Company	
-	3214 Moe No	Man Ct.	
-	Tishisville,	1 32780 ity/ State and Zip Code	•
	Harold mich E-mail address: (to be used	and S 88 @ and Com d for future annual report notification)	
For further informa	tion concerning this matter,	please call:	
Harold Name	hanson Contact Person	at (<u>401</u>) <u>595</u> - Area Code & Daytime Tel	ephone Number
Enclosed is a check	for the following amount m	nade payable to the Florida Depart	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 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 Circl	e

Tallahassee, FL 32301

Article	es of Amendm	ent			
A	to	4:			
Harold Mich	s of Incorpora of aels A	Hos, I	nc.		
(Name of Corporation as currently file	ed with the Flo	rida Dept. of Stat	<u>te</u>)		
(Document Number of C	Corporation (if k	(nown			
Pursuant to the provisions of section 607.1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this	Florida Profit C	Corporation ado	pts the follo	owing
A. If amending name, enter the new name of the col	rporation:				
				The new	
name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designation ame must contain the word "chartered," "professional B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDITION OF A STREET ADDITION OF THE ADDITIO	ation "Corp," " al association," a RESS) Compared to the second of the	Inc," or "Co". A	t professional c	ACAHASSEF FLORINA	FILED
Name of New Registered Agent:			_		
New Registered Office Address:	(Florida stree	et address)	-		
	(City)	(7in	, Florida Code)		
		(Lip	Coucy		
New Registered Agent's Signature, if changing Regist the hereby accept the appointment as registered agent. I		h and accept the o	obligations of the	e position.	
Signature	e of New Registe	ered Agent, if chan	nging		

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>	Name	Address	Type of Action
D	Harold Johansen	20445 Nettlabon St Orlands, FL 32833	☐ Add 区 Remove
President	Harold Johanson	3214 Moe Norman (4) This ville, F. 32780	M Add □ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter ch tional sheets, if necessary). (Be specific		
provisions	ndment provides for an exchange, reclassifier implementing the amendment if no applicable, indicate N/A)	ssification, or cancellation of issu t contained in the amendment it	ued shares, eself:

The date of each amendment(s) adoption: May 1, 2009
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 5-2-09
Signature Harris Voltage
(By a director, president of other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Harold Johanson
(Typed or printed name of person signing)
+ Cosidon+
(Title of person signing)