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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	KWIK AUTO S	ALES, INC	C
DOCUMENT NUMBER:	P06000040216		
The enclosed Articles of Amendmen	at and fee are submitted for	filing.	
Please return all correspondence con	cerning this matter to the fo	ollowing:	
Stepher	n M. Stone, Esq	uire	
	<u> </u>	f Contact Person	
Law Off	ices of Stephen	M. Stone	
	Firm	n/ Company	
725 Nor	th Magnolia Ave	enue	
		Address	
Orlando	, Florida 32803		
	City/·Sta	ite and Zip Code	
smstonelaw	v@cfl.rr.com		
E-mail ac	ddress: (to be used for futur	e annual report r	notification)
For further information concerning the	his matter, please call:		
Stephen M. Stone, E	squire	_{at (} 407	, 423-7910
Name of Contact Pers			e & Daytime Telephone Number
Enclosed is a check for the following	g amount made payable to t	he Florida Depar	tment of State:
•	cate of Status Certific	Filing Fee & ed Copy onal copy is ed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	rations	Division Clifton I 2661 Ex	address nent Section of Corporations Building secutive Center Circle see, FL 32301

Articles of Amendment Articles of Incorporation



KWIK AUTO SALES, INC.

14 OCT -8 AM 9: 05

(Name of Corpor	ation as currently	v filed with the	Florida E	ept. of State)
	P06	0000402	16	

	P06000040216	
(Documer	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corpora	tion adopts the following amendmen
A. If amending name, enter the new na	nme of the corporation:	
	tain the word "corporation," "company," or "i vation "Corp," "Inc," or "Co". A professional c tion," or the abbreviation "P.A."	
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	cable: OFFICE BOX	
D. If amending the registered agent an new registered agent and/or the new	-	ne name of the
Name of New Registered Agent	Stephen M. Stone, Esquire	
	725 North Magnolia Avenue	
New Registered Office Address:	Orlando (Florida street address)	lorida FL 32803 (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if cl	hanging Registered Agent: ered agent. I am familiar with and accept the obligations of New Registered Agent, if changing	gations of the position.

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	VIBHA NARANG	8749 The Esplanade #4
Add		•	Orlando, Florida 32836
Remove			
2) Change	VPS	KAMAL NARANG	8749 The Esplanade #4
Add			Orlando, Florida 32836
Remove			
3) Change	Р	ALI M. MATTAR	5242 Chiswick Drive
Add		<u> </u>	Orlando, Florida 32836
✓ _ 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)	nge(s) nere:			
7.1.1.1.1.1.		·····			
		-			
					
					
f an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassif	ication, or can contained in th	cellation of is	ssued shares t itself:	<u>.</u>
					
					<u> </u>
VIZ. FILL TO THE TAXABLE PROPERTY OF TAXAB					

if other than the The date of each amendment(s) adoption: _ date this document was signed. 14 OCT -8 AM 9: 05 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 (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 September 19, 2014 Signature (By a director, president or 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) Kamal Narang (Typed or printed name of person signing) Vice President (Title of person signing)