## P06000096163

(Re	equestor's Name)	· <del>-</del> ·
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. (Cit	ry/State/Zip/Phone #)	
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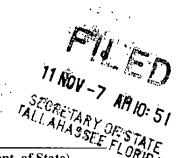
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EL CAMI	NO MOTORS, INC	
DOCUMENT NUMBER: P06000096163		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning th	nis matter to the following:	
MEL DAVIS		
Name	of Contact Person	
EL CAMINO MOTORS,	INC	
	irm/ Company	<del></del>
1711 BROWN ROAD		
	Address	
NORTH FORT MYERS	S, FL 33903	
	State and Zip Code	
AS FILED		
	ed for future annual report notification)	
For further information concerning this matter	, please call:	
MEL DAVIS	at ( 239 ) 980-5000	
Name of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a check for the following amount r	made payable to the Florida Departi	nent 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 Circle Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of



## EL CAMINO MOTORS, INC

(Name of Corporation as currently filed with the Florida Dept. of State

P06000096163		
	(Document Number of Corporation (if known)	

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

incorporated" or the abbreviation "Corp.,"  Co". A professional corporation name  ssociation," or the abbreviation "P.A."		tion "Corp," "Inc," or
Enter new principal office address, if appl		
Principal office address <u>MUST BE A STREE</u> T	<u>  ADDRESS                                  </u>	
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC	CE BOX)	
	egistered office address in Florid	a, enter the name of th
new registered agent and/or the new registered	egistered office address in Florid	a, enter the name of th
	egistered office address in Florid	a, enter the name of th
new registered agent and/or the new registered	egistered office address in Florid	a, enter the name of th
Name of New Registered Agent:	egistered office address in Florid tered office address:	a, enter the name of th

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>		Address	
1) <u>PST</u>	MEL DAVIS	1171 B	ROWN ROAD	
<b>/</b>	<del></del>	NORTH F	ORT MYERS, FL 33903	
				<del></del>
2)	<u> </u>			
3)			-	
3)				
4)	-	<u> </u>		
		·		<del></del>
5)				
6)				
				<u> </u>
If REMOVING	an officer and/or director, pleas	e list the title(s) gr	nd name of the officer	director to be
removed:	un onicer una or uneccos, pieus	e list the title(s) al	de manie of the officer	rancetor to be
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>	
1) <u>P</u>	MARGARET DAVIS	4)		
2)	-	5)		
3)		6)		

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(	ttach additional sheets, if necessary). (Be specific)
_	
_	
	f an amendment provides for an exchange, reclassification, or cancellation of issued share
	f an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
	provisions for implementing the amendment if not contained in the amendment itself:
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	provisions for implementing the amendment if not contained in the amendment itself:

The date of each amendment	(s) adoption: 11/1/2011
	11/1/2011 (date of adoption - required)
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	east for the amendment(s) was/were sufficient for approval
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•	(voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_ <b>11/1</b>	/2011
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court
арро	ointed fiduciary by that fiduciary)
	MEL DAVIS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)