# P0100000 8867

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09 APR -6 PM 2: 13

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	C & A	MOTORS,	INC.		
DOCUMENT NUMBER:	P07000	008867	<del></del>		
The enclosed Articles of Amendment	and fee are s	ubmitted for	filing.		
Please return all correspondence cond	erning this m	atter to the fe	ollowin	g:	
	ARMANDO	RUIZ			
	(Name of Co	ontact Person)			
	C & A M	OTCRS, I	NC.		
	(Firm/ C	Company)			
	1401 SW	27th Av	enue	#2nd Floor	
	(Ad	dress)			
	Miami,	Florida	331 <sup>1</sup>	+5	
	(City/ State	and Zip Code)			
For further information concerning th	is matter, plea	ase call:			
ARMANDO RUIZ		at ( 305	<b>)</b>	644-9216	
(Name of Contact Person)				Daytime Telephone N	umber)
Enclosed is a check for the following	amount made	payable to t	he Flor	ida Department of	State:
\$35 Filing Fee \$43.75 Filing F Certificate of S		\$43.75 Fill Certified ( (Additional enclosed)	Copy al copy is	Certi Certi (Add	0 Filing Fee ficate of Status fied Copy itional Copy nclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Add Amendmen Division of Clifton Bui 2661 Execu Tallahassee	nt Section of Corpore ilding outive Co	rations enter Circle	

#### Articles of Amendment to Articles of Incorporation of

ON SECRETARY OF STATE OF APR -6 PM 2: 13

C & A MOTORS, INC.

## (Name of Corporation as currently filed with the Florida Dept. of State) P07000008867 (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: A. If amending name, enter the new name of the corporation: The new 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) Florida (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)

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7-2-1							· · · · · · · · ·	
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The date of each amendment(s)	adoption: April 1, 2009
Effective date <u>if applicable</u> :	April 1, 2009 o more than 90 days after amendment file date)
(no	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were aby the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or 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 Carillo	ting group) "
(vo	ting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
	ril 1, 2009
Signature Signature	Tomos Peig
(By a d selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	ARMANDO RUIZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)