P070000050448

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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: TOP LINE	E AUTO BROKERS, INC.
DOCUMENT NUMBER: P070000504	48
The enclosed Articles of Amendment and fee are	
Please return all correspondence concerning this n	natter to the following:
WILLARD SCH	WINN
- · · · · · · · · · · · · · · · · · · ·	Name of Contact Person
	Firm/ Company
2278 ANCHORA	AGE LANE, APT. #D
	Address
NAPLES, FL 34	1104
	City/ State and Zip Code
ronsboat@msn.com E-mail address: (to be For further information concerning this matter, ple	used for future annual report notification)
WILLARD SCHWINN	at (330) 606-1065
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
\$35 Filing Fee \$\Bullet\$ 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	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	ATTICIES OF TH	
TOP LINE AUTO BROK	FRS. INC	
(Name of Corporation as		Florida Dept. of State)
P07000050448		
(Documer	nt Number of Corporation	(if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
_		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
		4406 EXCHANGE AVE.
	Enter new principal office address, if applicable: acipal office address MUST BE A STREET ADDRESS #113	
		NAPLES, FL 34104
C. Enter new mailing address, if apple (Mailing address MAY BE A POST		2278 Auchorage Lane
		Maples, Pl 34109
D. If amending the registered agent ar new registered agent and/or the new		
Name of New Registered Agent WILLARD SCHWINN		
Thirt of Hot design our spen	2278 ANCHORA	AGE LANE, APT. #D
	,	treet address)
New Registered Office Address:	NAPLES	, Florida 34104
	(City	y) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent.

Thereby accept the appointment as registered agent.

Liften Chew Lift 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)

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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	Title		Name	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				<u>```</u>
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)
N/A

The date of each amendment(s) adoption: August 10,5013		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
Dated	ugust 10, 2013	
Signature(By a	director, president or officer – if directors or officers have not been	
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	WILLARD SCHWINN	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	