## Florida Department of State

**Division of Corporations** Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090001861073)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EXECUTIVE CORPORATE FILING, INC.

Account Number : I2007000059 : (305)670-3110 Phone Fax Number : (305)665-1078

COR AMND/RESTATE/CORRECT OR O/D RESIGN

YOFON AUTO SALES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	

Electronic Filing Menu

Corporate Filing Menu

TROBERS AUG 21 2009

(((H0900g)

## **Articles of Amendment**

## Articles of Incorporation YOFON AUTO SALES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P07000131412 (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) new registered agent and/or the new registered office address:

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

Name of New Registered Agent:

PABLO Y. FONSECA

15340 SW 144TH PLACE

New Registered Office Address:

(Florida street address)

MIAMI

, Florida<u>33177</u>

(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

remoyed an	the Officers and/or Directors, enter to dittle, name, and address of each Offi	<u>he title and name of each officer</u>	((H09000186107 Cdirector being
(Attach addi	tional sheets, if necessary)		
<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	PABLO Y. FONSECA	15340 SW 144TH PLACE MIAMI, FL 33177	☑ Add □ Remove
D	JUAN CARLOS GUEVARA	15340 SW 144TH PLACE MIAMI, FL 33177	☐ Add ☑ Remove
<u>P</u>	JUAN CARLOS GUEVARA	15340 SW 144TH PLACE MIAMI, FL 33177	
(attach ad	ditional sheets, if necessary). (Be spec	rific)	
provisio	endment provides for an exchange, rest for implementing the amendment if applicable, indicate N/A)		

,	<u> </u>	AUGUST 20 2009	(((H09000186107		
	• •	(s) adoption: AUGUST 20, 2009 (date of adoption is require	?d)		
Effective da	te if applicable:  (no more than 90 days after amendment file date)				
Adoption of	Amendment(s)	(CHECK ONE)			
		e adopted by the shareholders. The number of re sufficient for approval.	votes cast for the amendment(s)		
		e approved by the shareholders through voting I for each voting group entitled to vote separal			
"The	number of votes of	east for the amendment(s) was/were sufficient	for approval		
by _		(voting group)			
	dment(s) was/wer s not required.	e adopted by the board of directors without sha	areholder action and shareholder		
	dment(s) was/wer s not required.	e adopted by the incorporators without shareho	older action and shareholder		
	Dated_08	120 2009			
	Signature	a director, president or other officer - if director	ors or officers have not been		
	selex	ted, by an incorporator – if in the hands of a reinted fiduciary by that fiduciary)			
		PABLO Y. FONSECA			
		(Typed or printed name of person	signing)		
!		PRESIDENT/DIRECTO	DR		
		(Title of person signing)			

(((H09000186107)))

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I am familiar with and accept the obligation of my position as registered agent. Or if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Pablo Y. Fonseca

Registered Agent

15340 SW 144<sup>TH</sup> PLACE

MIAMI, FL 33177