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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: European Car Sales of America, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Peter E Kilissanly Name of Contact Person European Car Sales of America, Inc. Firm/ Company 3850 S Dixie Highway Address Miami, FL 33133 City/ State and Zip Code kilissanly@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 448-2989

Area Code & Daytime Telephone Number Peter E Kilissanly Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



European Car Sales of America, Inc.

(Name of Corporation	on as currently filed with the Florida Dept. of State)		 -
P08000042766		% 02	
(Docum	nent Number of Corporation (if known)	Ş	,
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following	ng amendme	nt(s) to
A. If amending name, enter the new name of the co	rporation:		
		The new	
	d "corporation," "company," or "incorporated" or the c " "Inc," or "Co". A professional corporation name must abbreviation "P.A."		
B. Enter new principal office address, if applicable	<u> </u>		
(Principal office address MUST BE A STREET ADD	RESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	V)		
(mailing duaress MAT BE A TOST OFFICE BO.	<u> </u>		
D. If amending the registered agent and/or register			
new registered agent and/or the new registered	office address:		
Name of New Registered Agent		_	
<u></u>			
	(Florida street address)		
New Registered Office Address:	, Florida		
	(City) (Zip	(Code)	
New Registered Agent's Signature, if changing Regi	istered Agent:		
I hereby accept the appointment as registered agent.	l am familiar with and accept the obligations of the position.		
Signo	ature 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	$\underline{\mathbf{V}}$	Mike Ju	ones	
X Add	<u>SV</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	SVD	_	Odalys Kilissanly	
Add				
X Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional	dding additional Ar sheets, if necessary)		· 			
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provisions for in	t provides for an exemplementing the anicable, indicate N/A)	change, reclassifi nendment if not c	cation, or cancell ontained in the a	ation of issued sh mendment itself:	ares,	
						 .
						
						,
						
						
						

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	e will not be listed as the
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):	rt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(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.	
7/3/2017	
Signature Letter E. Kilimands	
(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)	
Peter F. Kilissanly	
(Typed or printed name of person signing)	
President	
(Title of person signing)	