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C LEWIS

COVER LETTER

TO: Amendment Section

Division of Corporations Broadway Auto Brokers, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alirio Valdes Name of Contact Person Broadway Auto Brokers, Inc. Firm/ Company 4421 Nw 6th street Address Gainesville Florida 32609 City/ State and Zip Code Broadway4421@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alirio Valdes Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **☑**\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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Broadway Auto Brokers, Inc.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
• •	N/A
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1
,	
C. Enter new mailing address if applicables	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	
•	
D. If amending the registered agent and/or registered office add	lress in Florida, enter the name of the
new registered agent and/or the new registered office addres	58:
Name of New Registered Agent N/A	
(Florida si	treet address)
N/A	
New Registered Office Address:	(City) (Zip Code)
	(Zip conc)
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
	-
()	Molina
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 Doe		
X Remove	$\underline{\mathbf{v}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
I) Change	D	Thomas Molina	1336 NE 154th Ave	
X Add			Williston Fl 32696	
Remove				
2) Change				
Add				
Remove			******	
3) Change			•	
Add				
Remove				
4) Change				
' Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

g necessury).	icles, enter change(s) here: (Be specific)
N/A	
•	
	<u> </u>
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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	N/A	FILEL
The date of each amendment(s) add	CRETARYIOD ther/than the	
date this document was signed.		BIVISION OF CORPORATION
Effective date if applicable:	N?A	2016 AUG -5 PM 2: 40
,	(no more than 90 days after amendment file date)	2010 1100 0 111
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, artment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes east for the amendation for approval.	dment(s)
	oved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
byN/A		
	(voting group)	
action was not required.	eted by the board of directors without shareholder action and sha	
action was not required.	ned by the incorporators without shareholder action and shareho	ider
· Dated	3/01/2016	
Signature	N///	
selected,	ector, president or other officer—if directors or officers have no by an incorporator—if in the hards of a receiver, trustee, or oth d fiduciary by that fiduciary)	
	Alirio A. Valdes	
_	(Typed or printed name of person signing)	
	President	
_	(Title of person signing)	···