## P08000005743

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
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12/29/08--01040--003 \*\*35.00

DIVISION OF CORPURATION

Amend 1094/09

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: SOUTH	FLORIBA ALITO FINANCE CORPORATIO
DOCUMENT NUMBER: POS 000	0 65 743
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Tose	OTERO of Contact Person)
(Name	of Contact Person)
South Flori	DA AUTO FINANCE CORP.
915 mas	(Address)
	State and Zip Code)
For further information concerning this matter,	, please call:
Tose OTERO (Name of Contact Person)	at ( <u>786</u> ) <u>316 - 3332</u> (Area Code & Daytime Telephone Number)
	nade payable to the Florida Department of State:
\$35 Filing Fee \$\sum \$	S43.75 Filing Fee & S52.50 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 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2009

JOSE OTERO SOUTH FLORIDA AUTO FINANCE CORPORATION 915 MADRID ST.
CORAL GABLES, FL 33134

SUBJECT: SOUTH FLORIDA AUTO FINANCE CORPORATION

Ref. Number: P08000065743

We have received your document for SOUTH FLORIDA AUTO FINANCE CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Photo copies are not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 709A00000855

SECRETARY OF STATE TALL AND STAIL TA

00:8 MA 35 HAL 6005

RECEIVED

## Articles of Amendment to Articles of Incorporation

0	of State of the St
S'outh FLORIDA Auto FINAL (Name of Corporation as currently file	NCE CORPORATION 9
(Name of Corporation as currently file	d with the Florida Dept. of State)
POS 1100 65743.	8
PO 8 00 00 6 5 74 3 · (Document Number of C	orporation (if known)
cursuant to the provisions of section 607.1006, Florid bllowing amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the
A. If amending name, enter the new name of the cor	poration:
The new name must be distinguishable and cont incorporated" or the abbreviation "Corp.," "Inc.," 'Co". A professional corporation name must issociation," or the abbreviation "P.A."	or Co.," or the designation "Corp," "Inc," or
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR	PESS)  CORAL GABLES  FV 33/34
<u></u>	CORAL GABLES
	FV 33134
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	·· ·
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	
Name of New Registered Agent:	JOSE OTERO
New Registered Office Address:	915 MADRID ST (Florida street address)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. position.	tered Agent:  I am familiar with and accept the obligations of the
	of New Registered Agent, if changing
Signature	of New Registered Agent, if changing

Page 1 of 3

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)

Title	<u>Name</u>	Address	Type of Action
, <u></u>	<del></del>	_	Add Remove
<u>S</u>	DAVIDE, SALVATORE	7333 CORAY WAY MIAMI FL 33155 45	Add Remove
°, <u>5</u>	OTERO JOSE	915 MADRID ST CORAL EABLES Fl. 33134	Add Remove
E. <u>If an</u> (attac <u>E</u> RT	nending or adding additional Articles, enter the additional sheets, if necessary). (Be speci ICLE II CHANGE OF	change(s) here: fic) ADDRESS	
ARTIC	CLE V- NEW REGISTER		E OTERO
	ADDRESS - 915		
	CORAL GABL	Es, F/	
<del></del>	· · · · · · · · · · · · · · · · · · ·		
pro	n amendment provides for an exchange, rec visions for implementing the amendment if (if not applicable, indicate N/A)		
			<u> </u>
		·	
	· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption: 12/11/2008
Effective date if applicable: 17/11/2008  (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
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):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
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.
Dated/2/11/2008
Signature
(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)
CARLOS RODRIGUEZ
(Typed or printed name of person signing)
(Title of person signing)
(Title of percon cigning)