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SEP 1 8 2015 C McNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	MIAMI SPRINGS	S AUTO SALES INC.		A MAGE
DOCUMENT NUMI	P08000082454 BER:			
The enclosed Articles	of Amendment and fee are so	abmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		جر فراد الرابع الوريع و وي و وي و و و و و و و و و و و و و و
	REGLA G. FERNANDEZ			iv.
	MIAMI SPRINGS AUTO S.	Name of Contact Personal ALES INC.	n	
	13634 SW 72ND TERRACE	Firm/ Company		
	MIAMI, FL. 33183	Address		
		City/ State and Zip Cod	e	
For further information	E-mail address: (to be us	sed for future annual report	notification)	~
Nome	of Contact Person	at (de & Daytime Telephone N	- <u></u>
	the following amount made		•	umber
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divis P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

MIAMI SPRINGS AUTO SALES INC.

	1,900 1,19
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P08000082454	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi 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:	
Trainenant name, ener the new name of the corporation	_
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
	3350 SW 148TH AVE. SUITEIIO
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	MIRAMAR, FL. 33027-3237
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13634 SW 72ND TERRACE
(Mutaing undress MAT DE ATOST OFFICE BOX)	MIAMI, FL. 33183
To the state of th	durant in Elevide, output the name of the
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
Name of New Registered Agent	
(Florida s	street address)
Now Besistand Office Address	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	<u>it:</u>
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
Signatura of Nav	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	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	BENITO FERNANDEZ	13634 SW 72ND TERRACE		
X Add			MIAMI, FL. 33183		
Remove					
2) Change	VP	ROGER D. FERNANDEZ	12356 NW 12TH CT.		
Add			PEMBROKE PINES, FL. 32026		
X Remove					
3) Change	-	_			
Add					
Remove					
4) Change	-				
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			
Add					
Remove					

	dding additional Arti sheets, if necessary).	(Be specific)	(b) mer t		
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<u>rovisions for im</u>	provides for an exchaplementing the amenable, indicate N/A)	ange, reclassificati adment if not cont	on, or cancellation	n of issued shares, Iment itself:	
				<u></u>	
			<u></u>		<u> </u>

	t(s) adoption:	, if other than the
date this document was signed Effective date if applicable:	I. SEPTEMBER 10, 2015	
Effective date it applicable.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated	09/10/2015	
Signature _	light	
s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	REGLA G. FERNANDEZ	
	(Typed or printed name of person signing)	·····
	PRESIDENT	
	(Title of person signing)	