## P09000013716

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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALL CARS INC		
DOCUMENT NUMBER: P09000013716		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
BLANCA L LACAYO		
	Name of Contact Person	1
HADAS ACCOUNTING A		
	Firm/ Company	
210 SW 107TH AVE		
	Address	
MIAM, FL 33174		
•	City/ State and Zip Cod	e
hadastaxeservices@gmail.com		
	used for future annual report	nctification)
• • • • • • • • • • • • • • • • • • • •		,
For further information concerning this matter, ple	nse call:	
BLANCA L LACAYO	at ( 305	222-2289 de & Daytime Telephone Number
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Depa	urtment of State:
© \$35 Filing Fee	**D\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is:enclosed)s
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## - Articles of Amendment to Articles of Incorporation of

ALL CARS INC		
(Name of Corporation as current	ly filed with the Florida Dept. of State)	
P09000013716		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following an	mendment(s) to
A. If amending name, enter the new name of the corporation:		
	77	he new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbr "Co". A professional corporation name must con	reviation
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	8440 NW 66 ST	
	DORAL, FL 33166	
C. Enter new mailing address, if applicable:	uring <b>G</b>	38
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	E CO	7
	Carif. 1	
	Trans.	
D. If amending the registered agent and/or registered office add		
new registered agent and/or the new registered office addres	<u>s:</u>	7:5
Name of New Registered Agent		9
(Florida si	treet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Coc	le)
		•
New Design and Assess to Company of the second a Design and Assess		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>E</u> with and accept the obligations of the position.	
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	PT	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change			·	
Add	<u>.</u>	<del></del>		
Remove				
3 ) Change				
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change				
Add				Executed Calculation of the Control
Remove				
6) Change		<del></del>		a
Add				
Remove				

attach additional sheets, if necessary).	cles, enter change(s) here (Be specific)	
		•
· · · · · · · · · · · · · · · · · · ·		
_		
<u>f an amendment provides for an excl</u>	iange, reclassification, or	cancellation of issued shares,
provisions for implementing the amo (if not applicable, indicate N/A)	ndment if not contained i	n the amendment itself:
(if not applicable, mileare 1971)		

The date of each amendment(s date this document was signed.	) adoption:	, if other than the
Effective date if applicable:		
<b>*</b>	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date wi Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	>>	
Askery comments of the second bright with	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	Jumphan	
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	v-range
	Josue A Mendez	
•	(Typed or printed name of person signing)	
. ·	President	
	(Title of person signing)	<del></del>

Emma