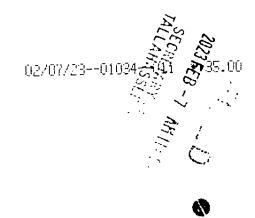
## P69000034825

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:T.E. AUTO	D SALES, INC				
DOCUMENT NUMBER: P09000034825					
The enclosed Articles of Amendment and fee are sul	bimitted for filing.				
Please return all correspondence concerning this mat	tter to the following:				
	YAN VALDES				
	Name of Contact Person				
V.	ALDES CPA & ADVISORS, P.A.				
	Firm/ Company				
1200 BRICKELL AVE SUITE 500					
	Address				
	MIAMI, FL 33131				
	City/ State and Zip Code				
	yvaldes@valdescpa.com				
E-mail address: (to be us	ed for future annual report notification)				
For further information concerning this matter, pleas  YAN VALDES					
Name of Contact Person	at ( 305 ) 517 - 3309  Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made					
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee  Certified Copy (Additional copy is enclosed) ☐\$52.50 Filing Fee  Certificate of Status Certified Copy (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 The Centre of Tallahassee 2415 N. Monroe Street. Suite 810				

Tallahassee, FL 32303

## Articles of Amendment to

Article	2023 I SECR TALLA	
T.E. A	ERS BASE	
(Name of Corporation as c	urrently filed with the Florida Dept. of State)	
	9000034825	I.o.
(Document Nu	unber of Corporation (if known)	(
Pursuant to the provisions of section 607.1006, Florida Statuto its Articles of Incorporation:	es, this Florida Profit Corporation adopts the follo	owing amendment
A. If amending name, enter the new name of the corporat	tion:	
T.RALLO AUTO SALES INC		The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc," or "Corporate and Corporate an	Co". A professional corporation name must co	ontain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office.	ice address in Florida, enter the name of the	
new registered agent and/or the new registered office a	iuui ess.	
Name of New Registered Agent		
(Fla	orida street address)	****
New Registered Office Address:	, Florida	(Zip Code)
	(City)	zap Cone)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	<u>Agent:</u> miliar with and accept the obligations of the positi	ion.
Signature of	New Registered Agent, if changing	<del></del>

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	mith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_	A1	
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				-
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific	iange(s) here: )				
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	shange reclass	sification, or c	ancellation of i	ssued shares.		
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
Enterne dare in appreciante.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the D	block does not meet the applicable statutory filing requirements, the epartment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendn afficient for approval.	ient(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s):	itement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
01 Dated	(26/2023	
Signature(By a c	irector, president or other officer – if directors or officers have not b	cen
	d, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	court
	TULIA RALLO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	