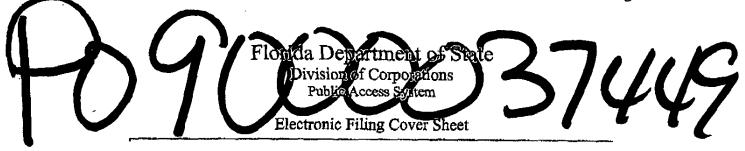
MAY. 12. 2009 2:02PM
Livision of Corporations

CAPITAL CONNECTION

NO. 3195---P. 1-

Page 1 of 1



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TO:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257

Phone : (850)224-8870

Fax Number

; (850)222-1222

AH 8: 00 2009 HAY 12

AUTOMOTIVE HEADQUARTERS, INC

OR AMND/RESTATE/CORRECT OR O/D RES[G]

Certificate of Status	0
Certified Copy	0
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Electronic Filing Menu

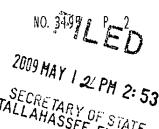
Corporate Filing Menu

100 T Help

5/12/2009

MAY. 12. 2009 2:03PM

CAPITAL CONNECTION



	to	2009 MAV.		
A	rticles of Incorporati	on SECRETARY OF 2:53		
	of	TALLAUTARY DE		
AUTOMOTIVE H	IEADQUARTERS	SECRETARY OF STATE ALLAHASSEE, FLORIDA Dept. of State		
(Name of Corporation as currently filed with the Florida Dept. of State)				
	000037449			
(Doownent Num)	ber of Corporation (if kno	own)		
Pursuant to the provisions of section 607.1006, mendment(s) to its Articles of Incorporation:	, Florida Statutes, this F	Torida Profit Corporation adopts the following		
1f amending name, enter the new name of	the corporation:			
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the common must contain the word "chartered," "professions	designation "Corp," "In	c," or "Co". A professional corporation		
		7,41		
. Enter new principal office address, if appli Principal office address MUST BB A STREET				
Enter new mailing address, if applicable:				
(Malling address MAY BE A POST OFFIC	<u>E BOX</u>)			
	-			
. If amending the registered agent and/or re	gistered office address i	n Florida, enter the name of the		
new registered agent and/or the new regist				
Name of New Registered Agent:				
New Registered Office Address:	(Florida street d	address)		
		Elasida		
-	(City)	, Florida (Zip Code)		
		. •		
lew Registered Agent's Signature, if changing hereby accept the appointment as registered ag	Registered Agent:	and accept the obligations of the position		
ter of a conche rise abhitraments on a signed on all	With A Mile Palister 19 1976 P	The state of the parties of the part		

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)

<u>Title</u>		<u>Name</u>	Address,	Type of Action
	<u>P</u>	KESEM MIKE	231 ALMOND AVE FORT LAUDERDALE, FL 33316	Add Remove
F	<u>-</u>	HEN MOSHE	FORT LAUDERDALE, FL 33316	☐ Add ☐ Remove
	_		ADDRESS	☐ Add ☐ Remove
E. <u>If i</u>	amendin ach addit	e or adding additional Articles, enter c tional sheets, if necessary). (Be specific	hange(s) bere:	
	· · · · ·			
				
F. <u>If</u>	ovisions	dment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)	ssification, or cancellation of issu of contained in the amendment it	<u>ied shares,</u> self:
· · · · · · · · · · · · · · · · · · ·				

MAY, 12, 2009 2:03PM	CAPITAL CONNECTION	NO. 3195 P.
The date of each amendmen	t(s) adoption: <u>05/12/2009</u>	
Effective date <u>if applicable</u> :		
The state of the s	(no more than 90 days after amendment file	s date)
Adoption of Amendmeut(s)	(CHECK ONE)	
	ere adopted by the shareholders. The number ere sufficient for approval.	of votes cast for the amendment(s)
	ere approved by the shareholders through voti and for each voting group entitled to vote separ	
"The number of votes	cast for the amendment(s) was/were sufficien	nt for approval
by	(voting group)	
action was not required.	ere adopted by the board of directors without some adopted by the incorporators without share	
Dated 05/1	2/2009	
	a director, president or other officer - if dire	
	ected, by an incorporator — If in the hands of a cointed fiduciary by that fiduciary)	receiver, trustee, or other court
	KESEM MIKE	
	(Typed or printed name of person	on signing)
	PRESIDENT	
	(Title of person signing)	