P09000054304

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DIVISION OF CORPORATIONS
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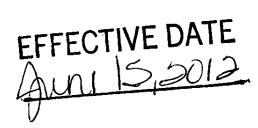
TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: K M RECO		ANSPORT CORP
DOCUMENT NUM	BER: P0900005430		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
•	MARIA MIRANDA	4	
		Name of Contact Person	1
	K M RECOVERY	AUTO TRANS	PORT COR
		Firm/ Company	
	9843 MOUNTAIN	I LAKE DRIVE	
		Address	· · · · · · · · · · · · · · · · · · ·
	ORLANDO, FLO	RIDA 32832	
		City/ State and Zip Code	<u>. </u>
		,	
<u>ma</u>	arialmenendez@m		
	1:-mail address: (to be us	sed for future annual report	notification)
For further informatic	on concerning this matter, pleas	se call:	
MARIA MIRA	ANDA	at (954	, 658-2986
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
□ \$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)
Mailing Address		Street Address	
Amendment Section		Amendment Section	
Division of Corporations			on of Corporations
	D. Box 6327	Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



K M RECOVERY AUTO TRANSPORT CORP

(Name of Corporation as currently filed with the I		
P0900054304	TOTILIA DEPL. OF STATE	
(Document Number 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 amendment(s) to	
A. If amending name, enter the new name of the corporation:		
K M RECOVERY AUTO TRANSPORT A	ND AUTO SALES CORP	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	"Co". A professional corporation name must contain the 🗸 🥡 👚	ごとう
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A N/A N/A N/A	一十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent N/A		
	reet address)	
New Registered Office Address: N/A (City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar N	with and accept the obligations of the position.	

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 <math>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 us 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
Change Add Remove			
2) Change Add Remove		<u>N/A</u>	
3) Change Add Remove		N/A	
4) Change Add Remove		<u>N/A</u>	
5) Change Add Remove		N/A	
6) Change Add Remove		N/A	

. If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itse (if not applicable, indicate N/A) N/A		c)	amending or adding additional Articl tach additional sheets, if necessary).
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(if not applicable, indicate N/A)	d shares,	sification, or cancellation of issued	an amendment provides for an excha
	<u>elf:</u>	ot contained in the amendment itsel	

The date of each amendment	(s) adoption: 04 03 2012
Effective date <u>if applicable</u> :	06/15/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(s) are sufficient for approval.
	c approved by the shareholders through voting groups. The following statement d 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 N/A	••
 	(voting group)
■ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
se	y a director, president or other officer – indirectors or officers have not been lected by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
×	MARIA MIRANDA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)