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SECRETARY OF STALK.
DIVISION OF CORFORATIONS

C. LEWIS

AUG 2 6 2014

EXAMINER

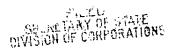
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	BEST DEA	LS CARS INC.			
DOCUMENT NUMBER: P0900072284					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence of	oncerning this mat	ter to the following:			
GUSTAVO LONDONO					
-		Name of Contact Perso	n		
BEST	BEST DEALS CARS INC.				
		Firm/ Company			
2333 FOWLER ST.					
		Address			
FORT	MYERS, F	L 33901			
	· · ·	City/ State and Zip Cod	e		
bestdealso	arsinc@ho	otmail.com			
	_	ed for future annual report	notification)		
			,		
For further information concerning	this matter, pleas	e call:			
GUSTAVO LONDONO		_{at (} 239	, 245-0684		
Name of Contact P	erson	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
	75 Filing Fee & ficate 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 Addres	s	Street	Address		
Amendment Sec		· · · · · · · · · · · · · · · · · · ·	Iment Section		
Division of Corporations		Division of Corporations			
P.O. Box 6327			Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



14 AUG 21 PM 4: 19

BEST DEALS CARS INC.

	s currently filed with the Flo	orida Dept. of State)		
P09000072284				
(Documer	nt Number of Corporation (if	known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006. Florida Statutes, this <i>F</i>	<i>llorida Profit Corporation</i> ado	pts the following amo	endment(s) to
A. If amending name, enter the new na	ame of the corporation:			
N/A			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc." or "C	o". A professional corporati	ated" or the abbrev	riation
		N/A		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
			<u>.</u>	
C. Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST)	<u>OFFICE BOX</u>)			
D. If amending the registered agent an	ıd/or registered office addre	ss in Florida enter the name	of the	
new registered agent and/or the new		33 III 7 TOTALA, CINCO THE HAIRE	- VI IIIC	
Name of New Registered Agent N/A				
				
	(Florida stree	et address)		
New Registered Office Address:	N/A	, Florida		
	(City)	. 7 101166	(Zip Code)	
New Registered Agent's Signature, if c	hunging Registered Agents			
I hereby accept the appointment as regist		ith and accept the obligations	of the position.	
Si,	gnature of New Registered Ag	zent, 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	GUSTAVO A LONDONO	9512 HEMINGWAY LN
✓ ∧dd			FORT MYERS, FL 33916
Remove			
2) Change		_	
Add			
Remove			40.0
3) Change		_	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
∧dd			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
RECLASSIFICATION OF ISSUED SHARES:	
GUSTAVO LONDONO: 50%	
GUSTAVO A LONDONO: 50%	

The date of each amendmen	t(s) adoption: <u>08/19/2014</u>	ONVISION OF C	ORPORATIONS	, if other than the
date this document was signed		44 4510 01	DM 1 . 1 C	
Effective date if applicable:	08/19/2014	14 AUG 21	Pf 4: 13	
		lays after amendment fil	e date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
	re adopted by the shareholders. The mere sufficient for approval.	umber of votes east for the	ne amendment(s)	
	re approved by the shareholders throug ed for each voting group entitled to vot			
"The number of vote	s east for the amendment(s) was/were s	ufficient for approval		
by				
	(voting group)			
The amendment(s) was/we action was not required.	re adopted by the board of directors wi	thout shareholder action	and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators withou	t shareholder action and	shareholder	
Dated_08/	19/2014			
S	By a director president or other officer elected, by an incorporator – if in the happointed fiduciary by that fiduciary)			
	GUSTAVO LONDONO			
	(Typed or prir	ited name of person sign	ing)	
	PRESIDENT			
	(Title	of person signing)		