

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 617-6380

Account Name : DEALER CONSULTING SERVICES, INC.

Account Number : I20010000121

Phone (: (305)758-9001

Fax Number : (305)758-0506

OR AMND/RESTATE/CORRECT OR O/D RESIGN

AUTOS WE TRUST, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
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Corporate Filing Menu

Help

10/14/2009

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF COR | PORATION: | Autos We Trust, in | С | | | |
|--|---|---|--|--|--|--|
| DOCUMENT NI | NT NUMBER: P09000083240 | | | | | |
| The enclosed Artic | cles of Amendment and foe a | are submitted for filing. | | | | |
| Please return all co | orrespondence concerning th | is matter to the following: | | | | |
| | | Maria Barranco | | | | |
| | r | Name of Confact Person | | | | |
| | Dealer | Consulting Services, Inc | | | | |
| | | Firm/ Company | - | | | |
| | 75 | 37 NW 7th Avenue | | | | |
| | | Address | | | | |
| | · | Miami, FL 33150 | | | | |
| | | City/ State and Zip Code | | | | |
| | info@ | gdcsmiami.com | | | | |
| · | E-mail address: (to be use | d for future annual report notification |) | | | |
| For further inform | ation concerning this matter, | please call: | | | | |
| | Maria Barranco | at (305) Area Code & Daytime ? | 758-9001 | | | |
| Name | of Contact Person | Area Code & Daytime | Felephone Number | | | |
| Enclosed is a chec | k for the following amount n | nade payable to the Florida Dep | artment of State: | | | |
| □ \$35 Filing Fee | S43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | | |
| Mailing A | | Street Address | | | | |
| Amendmen | | Amendment Section | | | | |
| Division of Corporations P.O. Box 6327 | | Division of Corporations Clifton Building | | | | |
| | e, FL 32314 | | 2661 Executive Center Circle | | | |

Tallahassee, FL 32301

| Articles of Amendment to Articles of Incorporation of Autos We Trust, Inc. |
|---|
| to |
| Articles of Incorporation |
| of Copyright |
| Autos We Trust, Inc. |
| (Name of Corporation as currently filed with the Florida Dept. of State) |
| P09000083240 |
| (Document Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: |
| A. If amending name, enter the new name of the corporation: |
| The new |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." |
| B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u>) |
| |
| |
| C. Enter new mailing address, if applicable: |
| (Mailing address MAY BE A POST OFFICE BOX) |
| |
| |
| If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address; |
| Name of New Registered Agent: |
| New Registered Office Address: (Florida street address) |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

, Florida_

(Zip Code)

| | |
|--|------|
| | |

| If amending the Officers and/or Directors, enter th | e title and name of each officer/director being |
|---|---|
| removed and title, name, and address of each Office | er and/or Director being added: |
| (Attach additional sheets, if necessary) | • |

| <u>Title</u> | Name | Address | Type of Action |
|------------------|--|--|-------------------------------|
| <u>D</u> | Abraham Rojas | 313 North State Rd 7 Hollywood, FL 33021 US | Add Remove |
| <u>v</u> | Abraham Rojas | 313 North State Rd 7 Hollywood, El 33021 | □ Add □ ☑ Remove |
| <u>s</u> | Florije Llmanl | 313 North State Rd 7 Hollywood, FL 33021 US | [7] Add ☐ Remove |
| E. <u>Hame</u> r | nding or adding additional Artic | les, enter change(s) here: | |
| (attach c | additional sheets, if necessary). | (Be specific) | |
| | | | |
| | | | |
| | | · | |
| | <u> </u> | | |
| | | | |
| proyla | amendment provides for an exchilions for implementing the amen not applicable, indicate N/A) | ange, reclassification, or cancellation o dment if not contained in the amendme | fissued shares. entituelf: |
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|--|---|--|--|--|--|
| The date of each amendment | t(s) adoption: 14-October-2009 | | | | |
| Effective date if applicable: | (s) adoption: 14-October-2009 (date of adoption is required) 14-October-2009 | | | | |
| The state of the s | (no more than 90 days after amendment file date) | | | | |
| Adoption of Amendment(s) | (CHECK ONE) | | | | |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. | | | | |
| | ere approved by the shareholders through voting groups. The following statement ed 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 | | | | |
| ъу | (voting group) | | | | |
| | (voting group) | | | | |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder | | | | |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder | | | | |
| Dated_14-0 | October-2009 | | | | |
| Signature | Bluesof | | | | |
| (By sel- | y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) | | | | |
| | Bahri Limani | | | | |
| | (Typed or printed name of person signing) | | | | |
| | President/Director | | | | |
| | (Title of person signing) | | | | |