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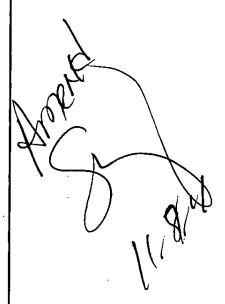
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
. PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

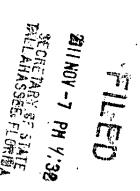
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: POINCIA	NA TOWING & RECOVERY, INC
DOCUMENT NUMBER: P09000099135	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning t	his matter to the following:
LIVAN PAMPILLO	
Nam	e of Contact Person
SMART ACCOUNTING	S SOLUTIONS INC
	Firm/ Company
8204 CRYSTAL CLEAF	R LN SUITE 1000
	Address
ORLANDO, FL 32809	
	State and Zip Code
,	
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter	r, please call:
LIVAN PAMPILLO	at (407) 816-9904
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & S52.50 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

POINCIANA TOWING & RECOVERY, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000099135

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts—te following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. 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: N/A 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.

N/A

Signature of New Registered Agent, if changing

(City)

(Zip Code)

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>		Address	
1) <u>P</u>	RAUL L RAMOS	837 A	DOUR DRIVE	
- / <u></u>		KISSIMN	IEE FL 34759	
2) <u>VP</u>	JORGE RAMOS		DOUR DRIVE EE FL 34759	
3)				
4)				
5)				
6)				
If REMOVING removed:	an officer and/or director, pleas	se list the title(s) a	nd name of the office	r/director to be
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>	
1)		4)		
2)		5)		
3)		6)		

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provisions for implementing the amen	nange, reclassification, or cancellation of issued shares adment if not contained in the amendment itself:
If an amendment provides for an exchorovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares adment if not contained in the amendment itself:
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provisions for implementing the amen	nange, reclassification, or cancellation of issued shares adment if not contained in the amendment itself:

The date of each amendmen	t(s) adoption: NOVEMBER 2, 2011
Effective date <u>if applicable</u> :	NOVEMBER (date of polantion - required)
Enecure date <u>it appreasie</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement of 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	"
	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 11/0	02/2011
g:(Lance
	a director, president or other officer – if directors or officers have not been
sele	cted, by an incorporator - if in the hands of a receiver, trustee, or other court
app	ointed fiduciary by that fiduciary)
	RAUL L RAMOS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)