P09000102885

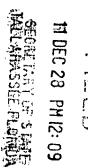
(Requestor's Name)
(Address)
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Amend Thereis 1-3-12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORROL	Advance	Car Care Cer	iter Corp.
DOCUMENT NUME	D00000102		
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	Juan L Gonzal	ez	
		Name of Contact Person	1
		Firm/ Company	
	18245 NW 68t	Address h Avenue Apt	414
		City/ State and Zip Cod	
	Miami, Florida		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Juan L Gor	zalez	at (305	, 821-4966
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	□\$52.50 Filing Fee Certificate of Status Certified Copy opy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

11 DEC 28 PM 12: 09

ADVANCE CAR CARE CENTER CORP

SEGRETARY OF STAFE

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

P09000102885				
(Docume	nt Number of Corporation (if k	nown)	\	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Fl</i>	orida Profit Corporation add	opts the following ar	nendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
				e new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	o". A professional corporat	rated" or the abbre tion name must con	rviation tain the
B. Enter new principal office address,				
(Principal office address <u>MUST BE A S</u>	STREET ADDRESS)			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				
(matting untress <u>MAT BE A FOST</u>	OFFICE BUX)			
		-		
D. If amending the registered agent ar	nd/or registered office addres	s in Florida, enter the name	e of the	
new registered agent and/or the ne-				
Name of New Registered Agent	Juan L Gonzale	ez		
	18245 NW 68th A	Avenue Apt. 414		
	(Florida street			
New Registered Office Address:	Miami	, Florida_3	33015	
	(City)		(Zip Code)	
New Registered Agent's Signature, if c hereby accept the appointment as regist		h and accept the obligations	of the monition	
nereny accept me appointment as regist	dered agenty ram; jaminar wil	п ана ассері те обпуаноня	of the position.	
Si	gnati <mark>ye of New Reg</mark> istered Age	ent, if changing		
	/ V			

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 Doc	
X Remove	<u>V</u> <u>!</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>Pr</u>	Gustavo Prieto	13356 53rd CT North Royal Palm Beach Florida 33411
2) Change Add Remove	<u>Pr</u>	Juan L Gonzalez	18245 NW 68th Avenue Apt. 41u Miami, Florida 33015
3) Change Add Remove	· 		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

L. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
	,	
(F-116-45-45-45-45-45-45-45-45-45-45-45-45-45-		
	<u>. </u>	
<u>provisions for implementing the amen</u> (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	
· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption: 12-23-2011		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
Dated 12-23	3-2011	
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fidaciary by that fiduciary)	
	Juan L Gonzalez	
	(Typed or printed name of person signing)	
	VP/ Director	
	(Title of person signing)	