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OLO APR -8 AH (8: 47) SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section. **Division of Corporations** NAME OF CORPORATION: Unbeual automotive Detail DOCUMENT NUMBER: PloopoolA90 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person perial automatine ine @ gmail. Con E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

•	Articles of Incorporation	
•	of	Ologo En
Umperial autom	otive Detailing	enc MECATO
(Name of Corporation as curi		Dept. of State
P100000 11496		Dept. of State) AFCREASSEE AND
	mber of Corporation (if known	1)
suant to the provisions of section 607.100 endment(s) to its Articles of Incorporation:)6, Florida Statutes, this <i>Flor</i>	rida Profit Corporation adopts the follow
If amending name, enter the new name of	of the corporation:	
Unperial automotive	(Jalon, Cluc.	The new
ne must be distinguishable and contain previation "Corp.," "Inc.," or Co.," or th ne must contain the word "chartered," "pr	e designation "Corp," "Inc,"	or "Co". A professional corporation
Enter new principal office address, if ap incipal office address <u>MUST BE A STRE</u>		
	/	
Enter new mailing address, if applicable	e:	
(Mailing address MAY BE A POST OFF.		
		·
If amending the registered agent and/or		Florida, enter the name of the
new registered agent and/or the new reg	istered office address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street add	dress)
		Florida
	(City)	, Florida (Zip Code)
w Registered Agent's Signature, if chang		d accept the obligations of the position
ereby accept the appointment as registered	agent. 1 am jamiliar with and	i accept the obligations of the position.
	Signature of New Registered	Agant if alamaina

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)

Title .	Name	<u>Address</u>	Type of Action
	· 		☐ Add☐ Remove
			□ Add □ Remove
			Add Remove
	ling or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
provisi	nendment provides for an exchange, rons for implementing the amendment oot applicable, indicate N/A)		
	<u> </u>		A Tables Control of the Control of t

The date of each amendment(s) adoption: Quil 5 2010 (date of adoption is required)
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
•	voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	5 2010
(By selec	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)