P1000037492

(Reque	stor's Name)	
(Addres	es)	
(Addres	ss)	·
(City/St	ate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
. (Busine	ss Entity Name)	
(Docum	ent Number)	
Certified Copies	Certificates of S	tatus
Special Instructions to Filin	g Officer:	
		:

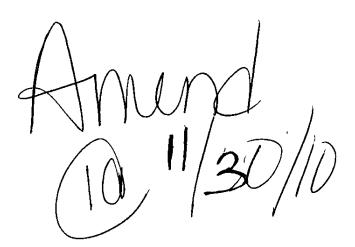




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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Hilliard Motors Inc.
DOCUMENT NUMBER: <u>\$1000037492</u>
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 Name of Contact Person Name of Contact Person Name of Contact Person Firm/ Company Address
City/ State and Zip Code hilliard motors@hotomil.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: On Floredge at (904) 8/3-//75 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
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of Incorporation	D
of	10 E
Hilliard Motors Inc.	
(Name of Corporation as currently filed with the Florida Dept. of St	ate)
P10000037492	ş
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit</i> amendment(s) to its Articles of Incorporation:	Corporation adopts the follo
A. If amending name, enter the new name of the corporation:	
	. The new
name must be distinguishable and contain the word "corporation," "company," abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". name must contain the word "chartered," "professional association," or the abbreviation.	A professional corporation
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
· · · · · · · · · · · · · · · · · · ·	 _
C. Enton was malling addings if any limble.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Manning and USS MAT BE AT OST OTT TOU BOA	
	
D. If amending the registered agent and/or registered office address in Florida, ent	ar the name of the
new registered agent and/or the new registered office address:	er the name of the
Name of New Registered Agent: John D. Eldredge,	Ir.
48088 Haddouk Rd.	
New Registered Office Address: (Florida street address)	<u>-</u>
	33.64
Hilliard 3204Ce (City) (Zij	_, Florida <u>32046</u> 2 Code)
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.
Idu DElder Ir.	
Signature of New Registered Agent, if cha	nging

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)

Name John D. Eldredge, Sr. Cather, neD. Eldredge Inhn D. Eldredge, Jr. Address Type of Action Title Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

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)

<u>Title</u>	Name	Address	Type of Action
1 <u>P,S</u>	Edwin J. Aschenbach	10201W.BeaverSt. Jacksonv.11e, F1,32220	Add Remove
			_
· ·			Add Remove
	ling or adding additional Articles, enter dditional sheets, if necessary). (Be speci		
provisio	nendment provides for an exchange, recomes for implementing the amendment if a contract of applicable, indicate N/A)		
	·		

The date of each amendmen	t(s) adoption:
Effective date <u>if applicable</u> :	10-30 (date of adoption is required)
	(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
by	. , ,,
·	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated/	0-30-10
Signature_(Catherine DR S.
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)
	Cather, ne Eldredge (Typed or printed name of person signing)
	(1 yped or printed name of person signing)
·	Secretary
	(Title of person signing)