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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: JULIO'S AUTOS INC DOCUMENT NUMBER: P10000080660 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PAMELA A GREEN Name of Contact Person EXPRESS 1040 INC Firm/ Company 319 3RD ST NW Address WINTER HAVEN FL 33881 City/ State and Zip Code EXPRESS1040INC@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (863) 293-1413

Area Code & Daytime Telephone Number PAMELA A GREEN Name of Contact Person 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 Certified Copy

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

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

JULIO'S AUTOS INC	11 D (10(1)
(Name of Corporation as currently filed with the Flo P1000080660	rida Dept. of State)
(Document Number of Corporation (if I	cnown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its $Articles$ of Incorporation:	forida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	72
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	ss in Florida, enter the name of the
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	t address)
New Registered Office Address: (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Cionatura of Nav. Papintared to	rant if changing

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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) 🚺 Change	<u></u>	ROBERT L SHIVER JR	1026 SUMMER GLEN DR
Add			WINTER HAVEN FL
Remove			33880
2) Change	OWN	INC,JULIO'S	PO BOX 1671
Add			EAGLE LAKE FL
Remove			33839
3) Change	OWNE	RUSTON,NICCOLE R	1800 AVE Q SW
Add			WINTER HAVEN FL
Remove			33880
4) Change	 		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional (Attach additional sheets, if necessar	ry). (Be specific)				
					
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			······································		
If an amendment provides for an	ovahango modlassif	iantion or anno	allation of issue	nd shawas	
provisions for implementing the (if not applicable, indicate N//	amendment if not o	ontained in the	amendment it	self:	
(у погаррисаоте, таксате 1477	1)				
					
			····	 – – –	
					
					
			7		

The date of each amendment	· · · · · · · · · · · · · · · · · · ·	, if other than the
date this document was signed	DECEMBER 12TH 2014	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
· ·	re 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	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_DEC	CEMBER 12TH , 2014	
Signature	xpicole luoton	
Sc	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	NICCOLE RAE RUSTON	
	(Typed or printed name of person signing)	