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SECRETARY OF STATE SIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: AUTO WORLD	SRV INC	
DOCUMENT NU	MBER: <u>P10000097507</u>		····
The enclosed Artic	les of Amendment and fee are subn	nitted for filing.	
Please return all co	rrespondence concerning this matte	r to the following:	
		GEL PRADA	
	(Name of C	Contact Person)	
	AUTO WC	RLD SRV INC	
	(Firm/	Company)	
	8034 NW 103	STREET STE: 28	
	(A	ddress)	
	HIALEAH GAI	RDENS FL 33016	
	(City/ State	and Zip Code)	
	autoworldin E-mail address: (to be used	c@hotmail.com for future annual report notifica	tion)
For further informa	tion concerning this matter, please	call:	
SOLANGEL PR		at (786) _536-6320	
(Nan	ne of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check	for the following amount made pa	yable to the Florida Department	of State:
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center	ns

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

AUTO WORLD SRV INC.

(Name of Corporation as curre	ently filed with t	ne Florida Dept. of Stat	<u>e</u>)
P10	000097507		
(Document Num	nber of Corporation	on (if known)	
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		this <i>Florida Not For Pro</i>	ofit Corporation adopts
A. If amending name, enter the new name of	f the corporation	<u>:</u>	
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" o			porated" or the
B. Enter new principal office address, if app	licable:		o
(Principal office address <u>MUST BE A STREE</u>	TADDRESS)		1 Nise
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE			JUL -7 AM S
<u>-</u>			
D. If amending the registered agent and/or r new registered agent and/or the new regis			r the name of the
Name of New Registered Agent:	SOLAN	IGEL PRADA	_
	8034 NW 10	3 STREET STE: 28	
New Registered Office Address: (Florida street address)		la street address)	•
	HIALEAH GA	ARDENS FL 33016	, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered position.	agent. I am f	ent: camiliar with and accept Registered Agent, if chan	
	Page 1 of 3		

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
<u>P</u>	ARIEL GUTIERREZ	8034 NW 103 STREET STE: 28 HIALEAH GARDENS FL 33016	☐ Add ☑ Remove
<u>P</u>	SOLANGEL PRADA	8034 NW 103 STREET STE: 28 HIALEAH GARDENS FL 33016	☑ Add ☐ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter clional sheets, if necessary). (Be specific		
			

The date of each amendment(s) adoption: 06/23/2011			
Effective date if applicable:	(date of adoption is required)		
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s roval.		
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.		
hav	the chairman or vice chairman of the board, president or other officer-if directive not been selected, by an incorporator – if in the hands of a receiver, trusted		
óth	er court appointed fiduciary by that fiduciary)		
	SOLANGEL PRADA		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		