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SECRETARY OF STATE DIVISION OF CORPORATIONS

Amand 10.28.13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Common	nwealth Gas S	tation, Inc.			
DOCUMENT NUMBER: P1000010	0364				
The enclosed Articles of Amendment and fee are					
Please return all correspondence concerning this n	natter to the following:				
Abbie R. Salt,	Esq.				
Law Offices o	Name of Contact Person f Abbie R. Salt				
740 NF 400 0	Firm/ Company				
710 NE 126 S		The state of the s			
North Miami F	Address FL 33161				
	City/ State and Zip Cod	e			
dennytires@gma E-mail address: (to be For further information concerning this matter, ple	used for future annual report	notification)			
Denny Fuentes		306-0212			
Name of Contact Person	at (Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount mad	e payable to the Florida Depa	artment of State:			
■ \$35 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Street Address Amendment Section Division of Corporations Clifton Building			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Commonwealth Gas Station, Inc.

(Name of Corporation as current	ly filed with the Florida	Dept. of State)	
₽10000100364			
(Document Number	er of Corporation (if know	n)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida</i>	Profit Corporation adop	pts the following amendment(s) t
A. If amending name, enter the new name of the	ne corporation:		
			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co" or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co"	impany. or incorporation in the corporation of the	on name must contain the
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u>)			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	 BOX)		4
			TO SECTION SEC
D. If amending the registered agent and/or reg new registered agent and/or the new registe		Florida, enter the name	of the 2
Name of New Registered Agent	- Washington		14.8
	(Florida street addr	<i>ess)</i>	<i>3</i> 3 <i>4</i>
Naw Dissistance Office Address		. Florida	
New Registered Office Address:	(City)	, riorida	(Zip 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.

Signature of New Registered Agent, 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.

Example: X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	V		DENNY FUENTES	1242 NE 145 Street
Add			•	Miami FL 33161
Remove				
2) Change		_		
Add Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change	<u></u>	_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

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an ame	ndment pro	vides for a	an exchans	ge, reclassif	ication, or	cancellation	of issued sh	ares.
<u>rovisio:</u>	n <mark>s for impl</mark> e ot applicable	menting t	<u>he amendr</u>	nent if not o	contained in	n the amend	ment itself:	<u></u>
(1) 110	н аррпсавн	e, mineine .	(VA)					
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated10/15/2013	
Signature Saula Sauce	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Sandra Simon, Trustee of Sandra Simon Trust 2/28/85	
(Typed or printed name of person signing)	
DPST	
(Title of person signing)	