P11000010383

| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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02/28/11--01026--013 **35.08

2011 FEB 28 PM 1: 18
SECRETARY OF STATE
ALLAHASSEF, FI ORIDA

Amend
Brown 3-1-11

COVER LETTER

. TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| NAME OF CORPORATION | ON: | IDEAL AUTO SALES I | NC |
|--|-----------------------------------|--|---|
| DOCUMENT NUMBER: | | P11000010383 | |
| The enclosed Articles of Am | nendment and fee | are submitted for filing. | |
| Please return all corresponde | ence concerning th | nis matter to the following: | |
| | (| SAGE R. FOSTER | |
| | 1 | Name of Contact Person | |
| | IDEA | AL AUTO SALES INC. Firm/ Company | |
| | | Time Company | |
| | 1173 | 32 VC JOHNSON RD. Address | |
| | JACH | KSONVILLE, FL 32218 | |
| | | City/ State and Zip Code | |
| E-n | nail address: (to be use | ed for future annual report notification) | |
| For further information conc | erning this matter, | , please call: | |
| SAGE R. FOSTER Name of Contact Person | | at (904) 8 Area Code & Daytime Te | 03-4032 |
| | | nade payable to the Florida Depar | • |
| | 75 Filing Fee & ificate of Status | S43.75 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 | | Street Address Amendment Section Division of Corporations | |

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to **Articles of Incorporation**

IDEAL AUTO SALES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000010383

| | Articles of Amendment | |
|---|---|--|
| • | to Articles of Incorporation | . |
| | of | 31, 11, |
| IDEAL AL | JTO SALES, INC. | Dept. of State) |
| (Name of Corporation as curr | ently filed with the Florida | Dept. of State) |
| | 000010383 | |
| (Document Num | nber of Corporation (if know | n) |
| resuant to the provisions of section 607.100 nendment(s) to its Articles of Incorporation: | 6, Florida Statutes, this Florida | rida Profit Corporation adopts the following |
| If amending name, enter the new name o | f the corporation: | |
| | | The new |
| | | |
| . Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE) | | |
| Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE) If amending the registered agent and/or registered agent and/or the new registered agent: Name of New Registered Agent: | registered office address in | Florida, enter the name of the |
| (Mailing address MAY BE A POST OFFICE . If amending the registered agent and/or registered agent and/or the new registered agent.) | registered office address in | |
| (Mailing address MAY BE A POST OFFICE If amending the registered agent and/or remains registered agent and/or the new registered agent and/or the new registered Agent: | registered office address in stered office address: | dress) |
| (Mailing address MAY BE A POST OFFICE . If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered Agent: | registered office address in stered office address: | |

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)

| <u>Title</u> | Name | Address | Type of Action | | |
|---|---|--|-------------------|--|--|
| VP | JOSEPH S. DEAN | 1683 BISCAYNE BAY CIRCLE JACKSONVILLE, FL 32218 | ☐ Add ☑ Remove | | |
| | | | ☐ Add ☐ Remove | | |
| * | | | ☐ Add ☐ Remove | | |
| (attach additi AMEND: AR | or adding additional Articles, enter chonal sheets, if necessary). (Be specific FICLE V OFFICERS AND/OR DIR |) ECTORS | | | |
| | S HIS 25 PERCENT OF SHARES | · · · · · · · · · · · · · · · · · · · | | | |
| | DEAN WAS VOTED TO TAKE TH | | SIDENT | | |
| | AS 50 PERCENT SHARES IN IDI | | | | |
| | TIVE DATE OF THIS AMENDMEN | | | | |
| 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) | | | | | |
| | | | | | |
| | | <u>-</u> | | | |
| | | | | | |

| The date of each amendment | t(s) adoption: JANUARY 31, 2011 | |
|--|---|--|
| Effective date if applicable: | (date of adoption is required) | |
| Effective date if applicable. | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/we by the shareholders was/we | 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 of 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) | |
| | (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 2 | 125/11 | |
| Signature | 125/11 Sove fare | |
| sele | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) | |
| | SAGE R. FOSTER | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |