## P11000031473

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Special Instructions to Filing Officer:	
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Office Use Only

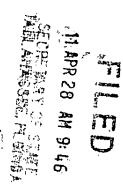


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DIVISION OF STATE TALLAHASSEE, FLORIDA

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PP 28/11

## **COVER LETTER**

TO: Amendment Section Division of Corporations		•	<b>u</b> r
NAME OF CORPORATION:	Lauis	. Astomotive	Inc.
DOCUMENT NUMBER:	P1100003	0(473	
The enclosed Articles of Amendme	nt and fee are subm	nitted for filing.	
Please return all correspondence co	ncerning this matte	r to the following:	
	Charles Name of (	Lovel Leu Contact Person	is
	Lewis Firm/	Automotive	Inc.
	6299 F	owers Ase	Ste 183
	Suck Sc City/ State	wille, FL	32216
E-mail addi	norles@lea	wis automotive in	
For further information concerning	this matter, please	call:	
-		Area Code & Daytime Tele	bb56 phone Number
Enclosed is a check for the following	ng amount made pa	yable to the Florida Depart	ment of State:
\$43.75 Filing Fee \$43.75 Filing Certificate of	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	A D C	treet Address mendment Section ivision of Corporations lifton Building 661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amo	endment
to	
Articles of Incor	FILED
$\bigwedge \circ \circ \circ \bigwedge \circ \circ$	
Lewis Hitomo-	HIJE LAC 11 APR 28 AM 9: 46  DEFINITION OF STATE
(Name of Corporation as currently filed with th	e Florida Dept. of State)
P110000311	473 MARIAN STATE
(Document Number of Corporation	n (if known)
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation	<u>:</u>
	The new
name must be distinguishable and contain the word "corpo abbreviation "Corp.," "Inc.," or Co.," or the designation "Con name must contain the word "chartered," "professional associat	rp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	6299 Powers Ave
(Principal office address MUST BE A STREET ADDRESS)	
	<u>Ste 183</u>
	Jacksonille, FL 32216
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3134 Cornelia dr
-	Jacksonsille FL 32257
D. If amending the registered agent and/or registered office a	
new registered agent and/or the new registered office add	ress:
Name of New Registered Agent:	
New Registered Office Address: (Florid	la street address)
	, Florida
(City)	(Zip Code)
$\cdot$	
New Registered Agent's Signature, if changing Registered Agent the appointment as registered agent. I am famil	
hereby decept the appointment as registered agent. I am junit	ial mini 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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
VP	Charles Fletcher La	Address  Wis 86 Ryne 18  Lygrange   GA	Add
		,	🗆 Add
			Remove
	ling or adding additional Articles, en		
(attach ad	lditional sheets, if necessary). (Be sp	ecific) 	
	1. 101 177 17 10 17 1017 17		
F. If an an	nendment provides for an exchange,	reclassification, or cancellation o	f issued shares,
provisio	ons for implementing the amendment		
(ij n	ot applicable, indicate N/A)		
<del></del>			
- <del></del>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	

The date of each amendment(s	adoption: 4-26-11
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/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	
(	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	4-28-11
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Charles Losell Lewis (Typed or printed name of person signing)
	President
	(Title of person signing)