## P11000039041

(Re	equestor's Name)	
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## **COVER LETTER**

**TO:** Amendment Section bivision of Corporations

	ATION: D & V MO ER: P11000039		
	f Amendment and fee are so	•	
Please return all corresp	oondence concerning this ma	atter to the following:	
f	PIERRE AND	RE NUMA	
- <u> </u>	D & V MOTOF	Name of Contact Person	on
• -	487 MARTIN F	Firm/ Company RD SE # 6	
<u> </u>	PALM BAY , F		1
NU	MAAUTO@GN E-mail address: (to be u	City/ State and Zip Co  MAIL.COM  sed for future annual report	
For further information	concerning this matter, pleas	se call:	
PIERRE-AN	IDRE NUMA	at (321	, 322-8188
Name of	Contact Person		ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment 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)
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Amen Divisi Cliftor 2661	t Address dment Section on of Corporations n Building Executive Center Circle hassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of



(Name of Corporation as	<u>currently filed with t</u>	<u>he Florida Dept.</u>	of State)
0020044			

P11000039041

nent(s) to

F11000033041			
(Document Number o	f Corporation (if know	vn)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this <i>Floria</i>	la Profit Corporation ad	opts the following amend
A. If amending name, enter the new name of the cOTO 1 MOTORS INC	orporation:		The n
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co".	A professional corporat	rated" or the abbreviati
B. Enter new principal office address, if applicabl			
(Principal office address <u>MUST BE A STREET AD</u>	DRESS )		
			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:	03K)		
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>)x</u> )		
	_	-	
D. If amending the registered agent and/or registenew registered agent and/or the new registered		Florida, enter the name	e of the
Name of New Registered Agent			
		_	
	(Florida street add	(ress)	
New Registered Office Address:		, Florida	
	(City)	, 1 101164	(Zip Code)
New Registered Agent's Signature, if changing Reg	ristared Agents		
I hereby accept the appointment as registered agent.	I am familiar with ar	nd accept the obligations	of the position.
			•
Signature of N	ew 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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add Remove			
6) Change		<u> </u>	
Add			
Remove			

ttach additional sheets, if necessary).	cles, enter change(s) he (Be specific)		
		<u></u>	
1			
			· <u>-</u>
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		···	
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	<del></del> _		<del></del>
			<del></del>
n amendment provides for an exchi- covisions for implementing the amen	ange, reclassification, o	r cancellation of is	sued shares,
(if not analizable indicate M/A)	diment it not contained	i in the amenument	nsen:
(if not applicable, indicate N/A)			
(y noi applicable, inalcale IV/A)	<u> </u>		
(y noi applicable, indicale IV/A)			
(y noi applicable, inalcale IV/A)			
(y not applicable, thatcale N/A)			-
(y noi applicable, inalcale IV/A)			
(y noi applicable, inalcale IV/A)			
(y noi applicable, inaicale IV/A)			

The date of each amendment(s) adoption: 05/01/2014	_, if other than the
date this document was signed.	
Effective date if applicable: 05/01/2014	
(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.	
Dated 04/15/2014	
(By a director, president or 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)	_
PIERRE ANDRE NUMA	_
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	_