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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: GROUP AUTO S.	ALES INC			
DOCUMENT NUMB					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
,	YLK JASCOŁKA SAMPAI	0			
-	· 	Name of Contact	Person		
•	GROUP AUTO SALES INC				
-		Firm/ Compa	ny		
:	5900 SW 42 PLACE BLD 20) BAY 2			
-		Address	. —		
1	DAVIE FL 33314				
-		City/ State and Zip	p Code	···	
YLK2	011@LIVE.COM				
	E-mail address: (to be us	sed for future annual i	report n	otification)	
	·		•	,	
For further information	concerning this matter, pleas	se call:			
YLK JASCOLKA SAN	MPAIO	at () 821 4674	
Name o	Ar	ea Code	e & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida	a Depar	tment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address			
Amendment Section			Amendment Section		
Divis	Division of Corporations				
	Box 6327			Building	
I ailai	hassee, FL 32314	2	ool Ex	ecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GRO	UP AUTO SALES INC			
	of Corporation as currently	filed with the Florida De	nt. of State)	
	0083134	inca with the a forten per	per or Brage	
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:			adopts the fo	ollowing amendment(s) t
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional corpor		
B. Enter new principal office address,				70%
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent ar	OFFICE BOX) Id/or registered office addres	ss in Florida, enter the na	me of the	
new registered agent and/or the ne				
Name of New Registered Agent	JADNA MASET			
	5900 SW 42 PLACE BLD 2	0 BAY 2		
	(Florida stree	t address)		
New Registered Office Address:	DAVI		_, Florida	33314
	(0	City)		(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	dered agent. I am familiar wil	,t	ns of the pos	ition.
	Signature of New Reg	gistered 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.

X Change	<u>PT</u> <u>Jol</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	SV Sa	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	JADNA MASET	4166 INVERRAY DR
X Add			BLD 10 APT 111
Remove			LAUDERHILL FL 33319
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	•

	02/10/1/	
The date of each amendment(s)		, if other than the
date this document was signed.		
and the document was signed.	00/10/17	
Control at the second of the s	02/10/17	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	s block does not meet the applicable statutory filing requirements, the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	lment(s)
	pproved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendment(s)	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
· —	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and sharehold	
	20112117	
Dated	02/10/17	
Signature		
(By a	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	
anno	inted fiduciary by that fiduciary)	
ար <i>ի</i> 0.	med inducially by that inducially)	
	YLK JASCOLKA SAMPAIO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	