

P/110000094518

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000273504 3)))



H110002735043ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CORPORATE ACCESS, INC.
Account Number : FCA000000011
Phone : (850) 222-2666
Fax Number : (850) 222-1666

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
PDP AUTO SALES INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

RECEIVED

11 NOV 17 AM 8: 00

TALLAHASSEE, FLORIDA

FILED
11 NOV 17 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amens

(H11000273504 3)

Articles of Amendment
to
Articles of Incorporation
of

PDP Auto Sales Inc.

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

711000094518

(Document Number of Corporation (if known))

FILED
11 NOV 17 PM 2:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

11349 S Orange Blossom Trl
Suite B106
Orlando FL 32837

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11349 S Orange Blossom Trl
Suite B106
Orlando FL 32837

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: PEDRO T. DISLA Richard O

(Florida street address)

New Registered Office Address: _____ Florida _____
(City) (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.

PEDRO T. DISLA Richard O

Signature of New Registered Agent, if changing

(H11000273504 3)

(H11000273504 3)

IF AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.
 (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) <u>P</u>	<u>Pedro T. Disla Richardo</u>	<u>3846 Cedar Hammock TRL</u> <u>Saint Cloud FL</u> <u>34772</u>
2) <u>VP</u>	<u>Rosa F. Rosario</u>	<u>3846 Cedar Hammock TRL</u> <u>Saint Cloud FL</u> <u>34772</u>
3) _____	_____	_____
4) _____	_____	_____
5) _____	_____	_____
6) _____	_____	_____

IF REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

(H11000273504 3)

(H11000273504 3)

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Page 3 of 4

(H11000273504 3)

(H11000273504 3)

- 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)

The date of each amendment(s) adoption: 11/17/11

Effective date if applicable: 11/17/11

(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 11/17/11

Signature _____

(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)

Rosa E. Rosario
(Typed or printed name of person signing)

Vice-President
(Title of person signing)