(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:			

Office Use Only



800249465948

07/12/13--01025--019 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	:FRAI	NKO CAR SALE	, INC			
DOCUMENT NUMBER:		P12000008034	<u> </u>			
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
	BR	ENDA ESPINO	SA			
	Name of Contact Person					
	BJ'S BUSINESS SERVICES, INC.					
	Firm/ Company					
	6330 WESTWOOD ACRES RD					
	Address					
-	FORT MYERS, FL 33905					
	City/ State and Zip Code					
	FREESF	PIRITLIFE@AOL	COM			
E-r	E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:						
BRENDA PLAZA		_{at (} 239	939-1000			
Name of Conta	ct Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
	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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE DIVISION OF CORPORATIONS

FRANKO CAR SALE, INC

(Name of Corporation as currently	ly filed with the Flori P12000080		13 JUL 12	I.F :OI MA
(Document Number	r of Corporation (if kn	· · · · · · · · · · · · · · · · · · ·		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Flor</i>	ida Profit Corporation :	adopts the following	g amendment(s) t
A. If amending name, enter the new name of the	e corporation:			
				The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or	orp," "Inc," or "Co"	. A professional corpor		
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)			
	_			
D. If amending the registered agent and/or reginer new registered agent and/or the new register	stered office address red office address:	in Florida, enter the na	me of the	
Name of New Registered Agent			-	
	(Florida street a	ddress)	_	
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		and accept the obligation	ns 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)

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	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u> y	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	TREASURER	WILLIAM F. TAVAREZ	5785 NW 116 AVE
· X Add			#107
Remove			MIAMI, FL 33178
2) Change	SECRETARY	JOSE LUIS FELIZ	9751 CARIBBEAN BLVD
$X \triangle Add$			CUTLEY BAY, FL 33189
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			·
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be spec	cific)
	M
. If an amendment provides for an exchange, rec	classification, or cancellation of issued shares,
provisions for implementing the amendment if	f not contained in the amendment itself:
(if not applicable, indicate N/A) Change- LUIS A. ECHAVARRIA	A - Shares - 40%
Change- CELESTE M. REYES	
Add- Willam F. Tavarez - Share	e -10%
Add- Jose Luis Feliz - Shares -	· 10%

The date of each amendment(s) adoption: 7/10/2013	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	<u> </u>
(no more than 90 days after amenament 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)	
(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.	
7/10/2013	
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)	
LUIS ECHAVARRIA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	_