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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CODDO	RATION: ECONO AL	JTO RENTALS,	INC.			
DOCUMENT NUME	BER: P1200001502	1				
	of Amendment and fee are su					
Please return all corres	spondence concerning this mat	tter to the following:				
	ANDREW M HAF	RROW				
	ECONO AUTO R	Name of Contact Persor ENTALS, INC.	1			
	Firm/ Company 105 US HWY 301 SOUTH, SUITE 110					
	TAMPA, FL 3361	Address 9				
<u>aha</u>	arrow001@gmail.c	City/ State and Zip Code COM sed for future annual report				
For further information	n concerning this matter, pleas	se call:				
ANDREW M	HARROW	at (813	621-0045			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

ECONO AUTO RENTALS, IN	<u>1C.</u>			
(Name of Corporation as curren	itly filed with the Flori	da Dept. of State)		_
P12000015021	-			
(Document Numb	per of Corporation (if kn	own)		
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this Floa	ida Profit Corporation	adopts the follow	ving amendment(s) t
A. If amending name, enter the new name of t	he corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	Corp." "Inc," or "Co"	. A professional corpo		
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET)		<u> </u>		_
	_			
C. Enter new mailing address, if applicable:	_			_
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>E BOX</u>)			
	-		<u></u>	
	-			_
D. If amending the registered agent and/or reg new registered agent and/or the new registered.		in Florida, enter the n	ame of the	
Name of New Registered Agent		·		_
				ဏ -
	(Florida street a	ddress)		
New Registered Office Address:		, Florid	···	
	(City)		(Zip Cáde)	
New Registered Agent's Signature, if changing	Registered Agent:			Ö
I hereby accept the appointment as registered age	ent. I am familiar with	and accept the obligation	ons of the position	7.
		<u> </u>	<u> </u>	
Signature	of New Registered Agen	t, 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	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	S	JULISSA HALCOMB	105 US HWY 301 SOUTH
Add			SUITE 110
Remove			TAMPA, FL 33619
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	-		
Remove			

The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
mappinense.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adop action was not required.	nted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	eted by the incorporators without shareholder action and shareholder	
Dated	10/23/13	
Signature	Auster Harror	
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diduction by that fiduction.	
_	Andrew M. Harrow (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
_	President	
_	(Title of person signing)	