Electronic Filing Cover Sheet

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(((H120001723173)))



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To:

Division of Corporations

Fax Number

: (850) 617-6380

From:

Account Name

: STEVEN R. KUTNER, P.A.

Account Number : I20010000180

(407)644-1104

Phone Fax Number

: (407)629-0090

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN **EVOLUTION AUTO SALES - LONGWOOD, INC.**

Certificate of Status	0
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Electronic Filing Monu

Corporate Filing Menu

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June 29, 2012

FLORIDA DEPARTMENT OF STATE

EVOLUTION AUTO SALES - LONGWOOD, INC.

2885 ALOMA LAKE RUN OVIEDO, FL 32765

SUBJECT: EVOLUTION AUTO SALES - LONGWOOD, INC.

REF: P12000019623

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts
Regulatory Specialist II

FAX Aud. #: H12000172317 Letter Number: 712A00017794

P.O BOX 6327 - Tallahassee, Florida 32314

06-29-2012	04:32pm	From-G1LDEN	PA	KUTNER	PA
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	Articles of	`Amendment	2012 1111 'LED'	
		ncorporation	2012 JUL -2 AMII: OL	
EVOLUTION AUTO SAI			STATE	ı
(Name of Corporation a		Florida Dent of	State STATE	_
P12000019623	s carretty inco wan the	ribilida Dept. Of	State) - Att 1914	
(Docume	nt Number of Corporation	(if known)	.	-
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is <i>Florida Profit C</i>	orporation adopts the following	ng amendment(s) to
A. If amending name, enter the new n	sme of the corporation:			
				_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A profess	or "incorporated" or the dilonal corporation name must	coniain the
B. Enter new principal office address.	if applicable:	1300 Ri	nehart Road	_
(Principal office address MUST BE A STREET ADDRESS)		Sanford	Sanford, Florida 32771	
				.
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	<u>icable:</u> <i>OFFICE BOX</i>)	1300 Rinehart Road		_
		Sanford	Sanford, Florida 32771	
D. If amending the registered agent ar			enter the name of the	_
new registered agent and/or the ne-	w registered office addre	<u> 285:</u>		
Name of New Registered Agent	4000 D: 1 /			
	1300 Rinehart			
New Registered Office Address:	Sanford	street address)	, Florida 32771	_
	(Ci	ty)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			he obligations of the position.	
, , , , , , , , , , , , , , , , , , , ,	- •	•	- '	
Si	gnature of New Registere	d Agent, if changin		

Page 1 of 4

If amending the Officers and/or Directors, enter the titic 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
A resident		THE POINT	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change	Ď	Sameor T. Asfoor	1300 Rinehart Road
Add Remove			Senford, Florida 32771
And the state of t			· • • • • • • • • • • • • • • • • • • •
2) × Change	۵	Kristy A. Asfoor	1300 Rinehert Road
Add Remove	· · · ·		Sanford, Floride 32771
3) Change			
Add		<u> </u>	
Remove			
4) Change			
Add _			
Remove			
5) Change		<i></i>	
Add		- /	
Remove		•	
6) Change			
Add			
Remove			

amending or adding additional Artic ttuch additional sheets, if necessary).	(Re specific)
· · · · · · · · · · · · · · · · · · ·	
rovisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(a) adoption: June 26, 2012	_
Effective date if applicable: June 26, 2012	
(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	SIGN
Signature (By a director, phaseour or other officer - if directors or officers have not been selected, by adminosporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	HERE
Sameer Asfoor	ė
(Typed or printed name of person signing)	,
Director	
(Title of person signing)	•