P12000027806

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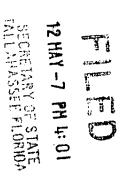
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MAY 1 0 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HTH Auton		, Inc.
DOCUMENT NUMBER: P1200002780	06	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Gerald M. Hoffma	an	
,	Name of Contact Person	n
HTH Automotive	of Tampa, Inc.	
	Firm/ Company	
P. O. Box 2164		
	Address	
Brandon, FL 335	09-2164	
	City/ State and Zip Cod	e
jhoffm10@tampabay	r.rr.com	
	sed for future annual report	notification)
For further information concerning this matter, please	se call:	
Jerry Hoffman	at (813	, 503-2696
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 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 2661 E	Address ment Section n of Corporations Building xecutive Center Circle
	Tallaha	issee, FL 32301

Articles of Amendment to Articles of Incorporation of

HTH Automotive of Tampa, Inc	C.	fan f		
(Name of Corporation as currently	y filed with the Floric		u fin lan	
P12000027806		12 HAY -7	PH In ou	
(Document Number	of Corporation (if kno	own) SECRETION	· · · · · · · · · · · · · · · · · · ·	_
(Document Number Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Flor</i>	ida Profit Corporation	addputing following	g amendment(s) to
·		· · · · · · · · · · · · · · · · · · ·		
A. If amending name, enter the new name of the	corporation:			
				_The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co".	A professional corp		
B. Enter new principal office address, if applica		<u>.</u> ,		-
(Principal office address <u>MUST BE A STREET A</u>	<u>DDRESS</u>)		-	
				_
				-
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE I</u>	<u>BOX</u>)			-
	_			_
·		A		-
D. If amending the registered agent and/or regis		n Florida, enter the i	name of the	
new registered agent and/or the new registere	ed office address:			
Name of New Registered Agent				
	(Florida street ad	ldress)		
New Registered Office Address:		; Flori	ida	
	(City)	,	(Zip Code)	-
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		and accent the obligat	ions of the position	
пособу иссерстве арронители из гезывлени изели	z um jummur wim t	ma accept the voltgat	iona of the position.	
Cinn dun of	Non Pagintand 4	if changing		
signature of	New Registered Agent	, ij cnanging		

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) × Change Add Remove	P	James W. Hoffman	P. O. Box 2164 Brandon, FL 33509-2164
2) × Change Add Remove	v	Gerald M. Hoffman	P. O. Box 2164 Brandon, FL 3350-2164
3) Change Add Remove		<u></u>	
4) Change Add Remove	_		
5) Change Add Remove		_	
6) Change Add Remove			

	cles, enter change(s) here: (Be specific)
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	T
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an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amon	uncht if not contained in the amendment itself.
rovisions for implementing the amen (if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
orovisions for implementing the amen (if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: May 1; 2012		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved 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 the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
_{Dated} May 3,	2012	
Signature (By a di selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoint	ed fiduciary by that fiduciary)	
_	Gerald M. Hoffman	
	(Typed or printed name of person signing)	
	Director/Vice President	
	(Title of person signing)	