P12000035707

(Re	questor's Name)	
(Add	dress)	<u>_</u>
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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04/30/12--01021--020 **35.00



5/2/12

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TAMPA BA	Y AUTO EXPERTS, INC.
DOCUMENT NUMBER: P1200003570	
The enclosed Articles of Amendment and fee are sub	emitted for filing.
Please return all correspondence concerning this matt	ter to the following:
TIM A. HAMED, C	PA
	Name of Contact Person
TIM A. HAMED, C	CPA, P.A.
· · · · · · · · · · · · · · · · · · ·	Firm/ Company
15310 AMBERLY	DR., STE 250
	Address
TAMPA, FL 3364	7
	City/ State and Zip Code
TIMHAMED@YAHO	O.COM
	ed for future annual report notification)
	·
For further information concerning this matter, please	e call:
TIM A. HAMED	at (813) 514-2905
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
■ \$35 Filing Fee	□\$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



TAMPA BAY AUTO EXPERTS, INC.

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

SECRETARY OF STATE

lment(s) to

P12000035707	SECRETARY OF STREET
(Document Number of Corpor	ration (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporat	tion:
N/A	The new
	poration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	<u>N/A</u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	
Name of New Registered Agent N/A	
Name of New Registered Agem	
(Fl	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	l Agent.
hereby accept the appointment as registered agent. I am fa	
Signature of New Regi	istered 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 <math>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 Doc	
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>	<u>Addres</u> s
1) Change Add Remove	VP	SALEH T. CHERAIF	8410 N. LOIS AVE TAMPA, FL 33614
2) Change Add X Remove	<u>T</u>	KHALDOUN EL-MOHTAR	8410 N. LOIS AVE TAMPA, FL 33614
3) Change Add Remove	<u></u>		
4) Change Add Remove			
5) Change Add Remove		-	
6) Change Add Remove			

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

The date of each amendment	(s) adoption: 04/25/2012
Effective date if applicable:	04/25/2012
in appreciate.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/wen by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d 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
*	(voting group)
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated $\frac{04/2}{8}$	y a director, president or other officer – if directors or officers have not been
sei	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	QUIRIAT J. HERNANDEZ-GOMEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)