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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ANT PERFORM	ANCE AUTO REPAIR CE	NTER, INC	
DOCUMENT NUMI	PÁ (2000) 27272			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	JOSE JESUS RAMOS			
		Name of Contact Person	1	
	ANT PERFORMANCE AUTO REPAIR CENTER, INC			
	Firm/ Company			
	3820 NW 135TH STREET.	SUITE O		
		Address		
	OPALOCKA, FL 33054			
		City/ State and Zip Cod	· ·	
ANT	PERFORMANCE3820@GM	AIL.COM		
	•	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:at (302	303-2455	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made		·	
🖄 \$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			Address	
	Amendment Section Amendment Section Division of Corporations Division of Corporations			
	Box 6327	Division of Corporations Clifton Building		
	Tallahassee, FL 32314 Circle 2661 Executive Center Circle			
			issee, FL 32301	

Articles of Amendment to Articles of Incorporation of

ANT PERFORMANCE AUTO REPAIR CENTER, INC

(<u>Name c</u>	of Corporation as curren	itly filed with the Flor	ida Dept, of State)
P12000037273			
	(Document Number	of Corporation (if know	vn)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corpo	ration adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or	"Co". A professiona	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		<u>8/A</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	THE SECOND SECON
D. If amending the registered agent an new registered agent and/or the new			the name of the
	JOSE JESUS RAMOS	38.	
Name of New Registered Agent	3820 NW 135TH STRE	ET SHITE O	<u> </u>
		Street addressi	
New Registered Office Address:	OPALOCKA	Ne CC1 (HIRIT 1881	. Florida 33054
over regiments signer rate cas.		(Cîţy)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

F. Q. Jase J. C. 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; F = 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: XChange	PT	John Doe		
X Remove	\underline{V}	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	P	ANTHONY ARIAS	3820 NW 135TH STREET	
Add			SUITE O	
X Remove			OPALOCKA, FL 33054	
2) Change	p	JOSE JESUS RAMOS	3820 NW 135TH STREET	
X Add			SUITE O	
Remove			OPALOCKA, FL 33054	
3) Change	V	OSVALDO DE JESUS RAMOS CEPEDA	3820 NW 135TH STREET	
X Add			SUITE 0	
Remove			OPALOCKA, FL 33054	
4) Change				
Add				
Remove				
5) Change			1.1.144	
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	
· ·	
F. If an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N A) JOSE JESUS RAMOS	90 %
<u> </u>	
OSVALDO DE JESUS RAMOS CEPEDA	10 %

	AUGUST 15, 2018	
The date of each amendment(s)	ndoption:	, if other than the
date this document was signed.	N	
S1 Effective date <u>if applicable</u> :	PT, 01, 2018	
	ino more than 90 days after amend	ment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filinglepartment of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes eastficient for approval.	ist for the amendment(s)
	proved by the shareholders through voting groups, or each voting group entitled to vote separately on t	
	t for the amendment(s) was/were sufficient for app	roval
by	(voting group)	. "
<u></u>	(voting group)	
The amendment(s) was/were a action was not required.	lopted by the board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder act	ion and shareholder
Dated	20/2018	
Signature †	director, president or other officer – if directors or	
(By a	director, president or officer - if directors or	officers have not been
	ed, by an incorporator – if in the hands of a receive nted fiduciary by that fiduciary)	r, trustee, or other court
пріх	med fiduciary by diac fiduciary f	
	JOSE JESUS RAMÓS	
	(Typed or printed name of person sign	ning)
	PRESIDENT	
	(Title of person signing)	·