P12.00052813

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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14 MAY 23 AM II: 10

C. LEVISIO 2014

EXAMINIER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Credit Un	ion Auto Ir	nc	
DOCUMENT NUMBER	P120000528	13		
The enclosed Articles of A	mendment and fee are su	bmitted for filing.		
Please return all correspon	dence concerning this ma	tter to the following	ng:	
		Kathryn A	moros	so
		Name of Cont	act Person	
	Credit Union Auto Inc			
		Firm/ Con	npany	*
	815 N	Homestea	id Blv	d., #628
		Addre	:SS	
	Hom	estead, Fi	orida :	33030
		City/ State and	l Zip Code	;
	amo	orosoana@	yaho	o.com
	E-mail address: (to be us	sed for future annu	ual report r	notification)
For further information con	ncerning this matter, pleas	se call:		
Kathryn A	moroso	at (305	338-4148 le & Daytime Telephone Number
Name of Co	ontact Person	·····	Area Cod	ie & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Flo	rida Depar	rtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional conclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing	Address		Street /	Address
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327				n of Corporations
	sec. FL 32314			Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

14 MAY 23 AM 11: 10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Credit Union Auto Inc

(Name of Corporation as currently filed with the Florida Dept. of State) P12000052813

(Document Number of Corporation (if known)

nent(s) to

A. If amending name, enter the new name of the corporation: CUA Inc	The ne	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviatio "Co". A professional corporation name must contain th	
B. Enter new principal office address, if applicable:	Kathryn Amoroso	
(Principal office address MUST BE A STREET ADDRESS)	815 N Homestead Blvd # 2	
	Homestead, FL 33030	
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address 		
	n Amoroso	
	estead Blvd., #628	
	street address)	
New Registered Office Address: Homestead	, Florida 33030	
(Ci	· · · · · · · · · · · · · · · · · · ·	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent, fam familia Signature of New Registered	r with and accept the obligations of the position.	

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.

X Change	PT Jol	hn Doe	
X Remove	<u>v</u> <u>m</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P 	Ana Amoroso	815 N Homestead Blvd
Add			#628
Remove			Homestead, FL 33030
2) Change	P	Kathryn Amoroso	815 N Homestead Blvd
✓ Add			#628
Remove			Homestead, FL 33030
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5). Change			
Add			
Remove			
6) Change			
Add			
Remove			
Land Remove			

Attach additional sheets, if necessary).	(cles, enter change(s) here: (Be specific)
18-38-3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
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	7. 4450. P. C. J. J. G. C. J. C.
A CONTRACTOR OF THE CONTRACTOR	
A CONTRACTOR OF THE CONTRACTOR	
	<u> </u>
19 A ART TO THE WAR ARE ARE ARE ARE ARE ARE ARE ARE ARE A	
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

APPROVED AND FILED

The date of each amendment(s) adoption: _	14 MAY 23 AM II: 10	, if other than the
date this document was signed.	SECRETARY OF STAFE.	
Effective date if applicable:	TALL AHASSEE, FLORIDA	
Enterive vale in applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes east for the amendment(s) approval.	
	he shareholders through voting groups. The following statement ag group entitled to vote separately on the amendment(s):	
	endment(s) was/were sufficient for approval	
by	oting group)	
(v	oting group)	
The amendment(s) was/were adopted by th action was not required.	e board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by th action was not required.	e incorporators without shareholder action and shareholder	
Dated 5/20/14		
Signature	Alley Mon	
	esident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court	
	ry by that fiduciary)	
	Kathryn Amoroso	
AAP	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	