P1000050014

(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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NOV 30 2012,

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CODE	OD ATION	Marta A A O I I		
NAME OF CORP	ORATION:	Vission Auto Center, I	nc	
DOCUMENT NUMBER: P12000056014				
The enclosed Ar	ticles of Ame	ndment and fee are s	ubmitted for filing.	
Please return all	corresponder	ce concerning this mat	tter to the following:	
	Carmen Tra	iner		
			Name of Contact Person	
	Vission Aut	Center, Inc		
,			Firm/ Company	
	18715 SW	32 Ave Bay 132		
			Address	
	Homestead	FL 33033		
	•		City/ State and Zip Code	
For further inform	nation concern	E-mail address: (to	o be used for future annual report	notification)
Carmen Trainer			at (786) 768-6905	
	Name of Con	act Person		Daytime Telephone Number
Enclosed is a che	eck for the foll	owing amount made pa	ayable to the Florida Department o	f State:
X \$35 Filing Fe		3.75 Filing Fee & ertificate 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 Ade		Street A	ddress
Amendment Section		Amendm	ent Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Vission Auto Center, Inc				
(Name of Corporation as currently filed with the Florida Dept. of State)				
P12000056014				
(Document Number of Corporate	ion (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
A. If amending name, enter the new name of the corporation:				
The new name must be distinguishable and contain the word "corpora abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or contain the word "chartered," "professional association," or the abbrev	r "Co". A professional corporation name must			
B. Enter new principal office address, if applicable:	18715 SW 132 Ave Bay 132			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Homestead FI 33033			
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)				
				
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres				
Name of New Registered Agent: Carmen Trainer				
Name of New Yoghterea Agent.				
18715 SW 132 Ave Bay 1	32 street address)			
(, 15.182	siroot address,			
New Registered Office Address: Homestead (City	, Florida <u>33033</u> (Zip Code)			
	, 12, 3033,			
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position.			
	Agent, if changing			
Signature of New Registered	Agent, if changing			
-	29 1 8886 8886			
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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	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) X Change Add Remove	P	Carmen Trainer	18715 SW 132 Ave Bay 132 Homestead Fi 33033 100% Shares
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove	 		
5) Change Add Remove			
6) Change Add Remove		_	

The date of each amendment(s) adop	otion:11/24/2012
Effective date <u>if applicable</u> :	11/24/2012 (no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved 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)
The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder
action was not required. Dated Signature By sele	11/24/201 a director, president or other officer – if directors or officers have not been cited, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
<u></u>	Carmen Trainer CALUS TEANUR (Typed or printed name of person signing) (Title of person signing)