P12000092782

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Victory Lane Motorcars Inc. DOCUMENT NUMBER: P12000092782 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ivan Tello Name of Contact Person Victory Lane Motorcars Inc Firm/ Company 6600 Land O Lakes Blvd Address Land O Lakes, FL 34638 City/ State and Zip Code ivan.r.tello@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: $at \, (\frac{727}{\text{Area Code \& Daytime Telephone Number}})$ Ivan Tello Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) 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 Articles of Incorporation

Victory Lane Motorcars Inc

	to			
	Articles of Incorp	oration		the time
otoni I ana Mataragra	of			THE STATE OF THE S
ctory Lane Motorcars	is currently filed with the Flori	da Dent. of State)		
12000092782	Scarcing med with the Fior	ou pepti of State		
	ent Number of Corporation (if kn	own)		
suant to the provisions of section 607 Articles of Incorporation:	7.1006, Florida Statutes, this <i>Flo</i>	rida Profit Corporation a	dopts the following	g amendment(s) to
If amending name, enter the new n	name of the corporation:			
ne must be distinguishable and coo orp.," "Inc.," or Co.," or the desig rd "chartered," "professional associ	nation "Corp," "Inc," or "Co"	". A professional corpor	orated" or the a	_The new bbreviation contain the
Enter new principal office address incipal office address MUST BE A S				
Enter new mailing address, if app (Mailing address MAY BE A POST				-
If amending the registered agent a new registered agent and/or the new	ew registered office address:	in Florida, enter the na	ne of the	-
Name of New Registered Agent			-	
	19508 Shumard O		_	
	(Florida street	address)	24620	
New Registered Office Address		Florida	(Zip Code)	-
	(City)		(гір Сойе)	
w Registered Agent's Signature, if	changing Registered Agent:			
Tree ister our regard to congress of the	stered agent. I am familiar with			

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 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>	<u>Addres</u> s
1) Change	Р	Cesar Garcia	6600 Land O Lakes Blvd
Add			Land O Lakes, FL 34638
Remove			
2) Change	V	Juan M Ayala-Padilla	9648 SIMEON DR
Add			Land O Lakes, FL 34638
Remove			
3) Change	Р	Ivan Tello	6600 Land O Lakes Blvd
✓ ∧dd			Land O Lakes, FL 34638
Remove			
4) Change	т	Adriana Garzon	6600 Land O Lakes Blvd
√ Add			Land O Lakes, FL 34638
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<u> </u>
Remove			

(Attach additional sheets, if necessary).	cles, enter change(s) (Be specific)	-		
I/A				
	<u> </u>			
			<u></u>	
			· ·	

			-	
			<u> </u>	
				
If an amendment provides for an exch	ange, reclassification	n, or cancellation	of issued shares	2
	<u>ıdment if not contai</u>	ned in the amend	ment itself:	
if not applicable, indicate N/4)				
(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)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

	ion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for t	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	i by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated 7/31/14		
Signature	Memb	
· ·	br, president or other officer - if directors or officers have not been	
	y an incorporator – if in the hands of a receiver, trustee, or other court (iduciary by that fiduciary)	
lva	an Tello	
	(Typed or printed name of person signing)	
Pro	esident	
	(Title of person signing)	