13000010676

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)
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JUL 1 4 2015 T CANNON

COVER LETTER

*TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JAN MOTORS EN	NTERPRISE CORP	
DOCUMENT NUMB		·	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ELSIE MARICHAL		
•		Name of Contact Persor	n
	JAN MOTORS ENTERPRIS	SE CORP	
•		Firm/ Company	
	8388 NW 56TH STREET		
		Address	
	DORAL FL 33166		
•		City/ State and Zip Cod	e
	E-mail address: (to be u	sed for future annual report	notification)
	2 man address, (av ve a	sec in mane unual report	TRACTICALITY
For further information	concerning this matter, plea	se call:	
ELSIE MARICHAL		at (356-4347
Name c	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$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)
	ling Address		Address
Amendment Section			lment Section
Division of Corporations			on of Corporations
	Box 6327 hassee, FL 32314		n Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

JAN MOTORS ENTERPRISE CORP

JAN MOTORS ENTER RISE CORT			· · · · · · · · · · · · · · · · · · ·
(<u>Name of Corp</u> e	oration as currently filed with the Florida Dept. of State)		
P13000010676			
(D	Occument Number of Corporation (if known)		
Pursuant to the provisions of section 607,1006, F its Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following	ng amer	ndment(s) to
A. If amending name, enter the new name of t	he corporation:		
· ·		***	
	word "corporation," "company," or "incorporated" or the c Corp," "Inc," or "Co". A professional corporation name must withe abbreviation "P.A."		ution
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)		
	gistered office address in Florida, enter the name of the	15 JUL -	SECRETAR SECRETAR TALLAHASI
Name of New Registered Agent		PH-	1338 1037 1037
	(Florida street address)	_ င္မာ	STA LOR
New Registered Office Address:	Florida	-	10A
	(City) (Zip	(Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	g Registered Agent: with and accept the obligations of the position,		
	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:

 $P = President; \ V = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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.

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	KELVIN D MOTA CARVAJAL	510 NW 86 PL APT 204
Add			MIAMI FL 33126
X Remove			
2) Change	P	ELSIE MARICHAL	751 NW 123rd COURT
X Add			MIAMLFL 33182
Remove			
3) Change			- S
Add			
Remove			1 333
4) Change			PH ST
Add			S: LL SRIDA
Remove			
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)		
V/A		-
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	<u> </u>	SEC ALL
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	-7	SS 25
	PH	
		- <u>Es</u>
	3: 44	REG
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:		Þ
(if not applicable, indicate N/A)		
N/A		_
		_
		_
		_
		_
	· · · · · · · · · · · · · · · · · · ·	_
		

•	06/01/2015	
The date of each amendment(s) a date this document was signed.	Aoption:	, if other than the
. 06/0	01/2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this l document's effective date on the Do	block does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendmental for approval.	ent(s)
	proved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	SECTALI
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareh	FILE SASSET
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholde	FILED ECRETARY OF STATE LLABASSEE FLORID 5 JUL -7 PH 3: 43
06/01/201 Dated		±3 ⊡A
selecti	drector, president or other officer – if directors or officers have not bed, by an incorporator – if in the hands of a receiver, trustee, or other	
аррон	nted fiduciary by that fiduciary)	
	KELVIN D MOTA CARVAJAL	
	(Typed or printed name of person signing)	
	FORMER PRESIDENT	
	(Title of person signing)	