P1300033918

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: GULF BEACH A	UTO INC	
	JMBER: P13000033918		
	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	IGOR AFANASJEV		
		Name of Contact Persor	1
	GULF BEACH AUTO INC		
	·····	Firm/ Company	
	5810 N. PALAFOX ST		
		Address	<u> </u>
	PENSACOLA, FL 32503		
		City/ State and Zip Code	2
	admin@gulfbeachauto.org		
		sed for future annual report	notification)
For further inform	ation concerning this matter, pleas	se call:	
IGOR AFANASJ	EV	, 850	291-9224
Na	me of Contact Person	at (Area Coo) 291-9224 de & Daytime Telephone Number
enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	e □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of



GULF BEACH AUTO INC

(Document Number of Corporation (if known) Parsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendmen its Articles of Incorporation: A. If amending name, enter the new name of the corporation: IGOCAR INC The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc." or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address MAY BE A POST OFFICE BOX) N/A D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A N/A N/A (Florida street address) N/A (Florida street address)	P13000033918		tly filed with the Florida Dept. of State) (大学 原 等原) (
As If amending name, enter the new name of the corporation: GOCAR INC	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
And the new mast be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A N/A (Florida street address) N/A N/A (Florida street address) N/A N/A (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:		1006, Florida Statutes, thi	s ${\it Florida\ Profit\ Corporation}$ adopts the following amendment(s) t
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 3. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A N/A N/A (Florida street address) N/A N/A N/A N/A (Florida street address) N/A N/A N/A N/A (City) (Zip Code)	A. If amending name, enter the new n	ame of the corporation:	
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C. Enter new mailing address, if applicable: (Mailing address MUST BE A STREET ADDRESS) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A N/A N/A (Florida street address) N/A N/A Florida Florida Florida	"Inc.," or Co.," or the designation "C	Torp," "Inc," or "Co",	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
O. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent			N/A
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent			
new registered agent and/or the new registered office address: Name of New Registered Agent			N/A
new registered agent and/or the new registered office address: Name of New Registered Agent			
new registered agent and/or the new registered office address: Name of New Registered Agent). If amending the registered agent an	d/or registered office ad-	dress in Florida, enter the name of the
Name of New Registered Agent N/A (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:			
(Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	Name of New Registered Agent	N/A	
New Registered Office Address: (City) Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent:		N/A	
New Registered Office Address:		(Florida s	treet address)
New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:	N/A	Florida
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.			(City) (Zip Code)
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Agent's Signature, if c	hanving Registered Ager	nte
	hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	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>		Address	
1) N/A Change	N/A	N/A	· ··	N/A	_
Add					_
Remove					_
2) Change					
Add					_
Remove 3) Change					_
Add					_
Remove					
4) Change					_
Add					
Remove					
5) Change					_
Add					
Remove					
6) Change					
Add					_
Remove					

(Attach additional sheets, if necessary).	ticles, enter change(s) here: . (Be specific)	
/A		
	-	
· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·		
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
A		
A		
1.3		

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this educument's effective date on the Department of State's records.	late will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder ac action was not required.	tion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmen by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
Dated 3/14/23 MA	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a received trustee, or other components appointed fiduciary by that fiduciary)	
IGOR AFANASJEV	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)