P13000 040 446

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AUTO FINANCE	CENTER INC		
	ER: P13000040446			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	JENNY AMENEIRO			
		Name of Contact Person	1	
	AUTO FINANCE CENTER	INC		
•		Firm/ Company		
	1417 SADLER RD # 200	v v v v v v v v v v v v v v v v v v v		
-		Address		
	FERNANDINA BEACH FL	32034		
•		City/ State and Zip Cod	e	
JENN	Y@AUTOFINANCECENTI	ER.NET		
* .	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	va call:		
rot further information	r concerning this matter, preas	se can.		
JENNY AMENEIRO		at (
Name o	of Contact Person	Area Code & 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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divis P.O.	ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amenc Divisic Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Α	UTO	FINA	NCF	CENTER	INC

P13000040446	orporation as currently	filed with the Florida Dept. of St	ate)		
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607,100 its Articles of Incorporation:	06, Florida Statutes, this I	Florida Profit Corporation adopts t	he followir	ig amen	dment(s) to
A. If amending name, enter the new name	of the corporation:				
				The	new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or "C	Co". A professional corporation is			
B. Enter new principal office address, if a	ipplicable:	1417 SADLER RD #200			
(Principal office address MUST BE A STR		FERNANDINA BEACH FL 32034			
			70	201	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1417 SADLER RD # 200	LLAH	9 AUG -	
		FERNANDINA BEACH FL 320	34 SS-	\(\frac{1}{2}\)	— (= ₹/=)
			m _e .	<u>ဥ</u> ယ္	_;;;
D. If amending the registered agent and/onew registered agent and/or the new recommendation and the ne		•••	he it.	57	
Name of New Registered Agent	ENNY AMENEIRO				
	117 SADLER RD #200	•		_	
	(Florida stre	et address)		-	
					
New Registered Office Address:	ERNANDINA BEACH	, Flori	32034		

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 Do	<u>oe</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

Attach additio	r adding additional Article nal sheets, if necessary). (Be specific)			
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provisions for	ent provides for an exchan r implementing the amend	ge, reclassification, o ment if not contained	or cancellation of iss I in the amendment	itself:	
(if not ap	plicable, indicate N/A)				
		· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·			
				n	

The date of each amendment(s) a	07/01/2019 adoption:	if other than the
date this document was signed.	daphion.	, if other than the
=	01/2019	
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendme ufficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were ac action was not required.	lopted by the incorporators without sharcholder action and shareholder	
07/30/201 Dated Signature	9	
(By a select	director, president of other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	JENNY AMENEIRO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

. . . .