P1300005517/

(Re	equestor's Name)	
· (Ad	ldress)	
(Ad	ldress)	
(Cit	iy/State/Zip/Phone	e #)
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(Do	ocument Number)	
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MAY 0 7 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MND Auto Sales,	Inc.	
DOCUMENT NUMBER: P13000055171		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Michael Downs		
	Name of Contact Person	1
MND Auto Sales Inc		
 	Firm/ Company	
2501 NW 17th Lane, Ste C		
	Address	
Pompano Beach, FL 33064		
	City/ State and Zip Cod	t
mndentinc@gmail.com		
- -	used for future annual report	notification)
For further information concerning this matter, plea	ase call:	
Michael Downs	949 at (290-7506
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporati	on as currently filed with th	e Florida Dept. of State)		
MNd Auto Sales Inc - P13000055171			ES	201
(Docum	nent Number of Corporation (i	f known)	2.2	S APR
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this <i>Florida Profit</i>	Corporation adopts the follow	ving almendn	nentie O
A. If amending name, enter the new name of the co	orporation:		OF STA	AH IU:
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co". A profes	" or "incorporated" or the ssional corporation name mu	abbrevialio st contain ti	on G he
B. Enter new principal office address, if applicable				-
(Principal office address <u>MUST BE A STREET ADI</u>	DRESS)			
				=
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	D X)			
(Mining Harres Mill DE TITOET OF TEED BO				-
				-
				-
D. If amending the registered agent and/or register	red office address in Florida	, enter the name of the		
new registered agent and/or the new registered	office address:			
Name of New Registered Agent				
<u></u>				
	(Florida street address)			
New Registered Office Address:		, Florida		-
	(City)	(Z	(ip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		t the obligations of the position	n.	
Sign	nature of New Registered Agen	it, 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	Y	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	D	_	Christine Downs	2501 NW 17th Lane
x Add				Unit C
Remove				Pompano Beach, FL 33064
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
0 0				
6) Change		_		
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
		····		
				
				
f an amendment provides for an excl	ongo reclassification s	ur cancellation of issue	ied shares	
provisions for implementing the ame	ndment if not contained	in the amendment i	tself:	
(if not applicable, indicate N/A)				
			<u> </u>	
		-		

) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man to acty after amorament file state)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date w Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	"	
·	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
04/29/2	015	
Dated	——————————————————————————————————————	
Signatura		
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	Michael Downs	
	(Typed or printed name of person signing)	
	Registered Agent/Director	
	(Title of person signing)	