P130006/149

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MOTOR PO	DINT AUTO SAL	ES CORP	
DOCUMENT NUMBER: P13000061149				
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.		
Please return all corres	condence concerning this mat	ter to the following:		
	DAVID GOMEZ			
•		Name of Contact Person	1	
	MOTOR POINT A	AUTO SALES C	ORP	
•		Firm/ Company		
_	2820 N. ORANGE	E BLOSSOM TR	RL	
Address				
_	ORLANDO FL 32	804		
		City/ State and Zip Code	3	
mot	orpointauto@gma	ail.com		
		ed for future annual report	notification)	
For further information concerning this matter, please call:				
DAVID GOM	ΞZ	at (407	, 221-4404	
Name o	f Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department 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)	
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation

MOTON POINT AUTO SA	LES CORP	_
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
(Document Number of Corporation (if	(moun)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new name of the corporation:		
A. If amending name, enter the new name of the corporation;		
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must	_The new abbreviation contain the
B. Enter new principal office address, if applicable:	DAVID GOMEZ	
(Principal office address MUST BE A STREET ADDRESS)	111 SWEETBRIAR BR	-
	LONGWOOD FL 32750	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		_
		\$60 **VISIO 13 0
D. If amending the registered agent and/or registered office address:		RETARY OF CO
Name of New Registered Agent		## 10: 1 ## 10: 1 ## 10: 1
(Florida stre	get address)	1.45 1.415
New Registered Office Address: (City)	, Florida	_
(Cuy)	(Lip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		
Signature of New Registered A	gent, 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 Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PT	LEONEDIS PENA	111 SWEETBRIAR BR
Add			LONGWOOD FL 32750
Remove			
2) Change	PT	DAVID GOMEZ	111 SWEETBRIAR BR
Add			LONGWOOD FL 32750
Remove			
3) Change	S	DAVID GOMEZ	111 SWEETBRIAR BR
Add			LONGWOOD FL 32750
Remove			
4) Change	S	LEONEDIS PENA	111 SWEETBRIAR BR
Add			LONGWOOD FL 32750
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NONE
NONE
F. 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:
(if not applicable, indicate N/A) N/A
IVA

The date of each amendment(s) adoption: 10/09/2013	, if other than the
date this document was signed.	
Effective date if applicable: 10/09/2013	
Effective date if applicable: /0 /09 /2013 (no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	•
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
_{Dated} 10/09/2013	
Signature David Gomez / Oct Soy	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
DAVID GOMEZ	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_