P130000 72455

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SECRETARY OF STATE TALLAPASSEE. FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: PRINCIPAL CAR	FINANCE, INC	
DOCUMENT NUMBI	ER: P13000072455		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
I	AARON MARAMBIO		
-		Name of Contact Person	n
I	PRINCIPAL CAR FINANC	E, INC	
		Firm/ Company	241
7	770 PONCE DE LEON BLV	•	
-		Address	
(CORAL GABLES, FL 3313	4	
		City/ State and Zip Cod	e
	_		
ZRAB	ELO.JRA@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
AARON MARAMBIO	1	786 at (703-8118
Name of	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)
Amen Divisi P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

PRINCIPAL CAR FINANCE, INC

(2)			
P13000072455	rrently filed with the Florida Dept. of State)		
	mber of Corporation (if known)	<u> </u>	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the follow	ring amendment(s)	to
A. If amending name, enter the new name of the corporati	on:		
MY PCF, INC		The new	
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevia	" or "Co". A professional corporation name mus	abbreviation	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SECRETÀ TALLAHA:	Ť
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		RY OF ST	== T1 D
Name of New Registered Agent		TATE ORIDA : 1,2	
(Flo	rida street address)	_	
New Registered Office Address:	, Florida		
	(City) (Zi	p Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan		ı. 	
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.

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)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	ST	JUAN C GUILLEN	770 PONCE DE LEON BLVD	_
X Add			STE 102	_
Remove			CORAL GABLES, FL 33134	-
2) Change				_
Add				_
Remove				-
3) Change				- T s
Add			თ <u>— — — — — — — — — — — — — — — — — — — </u>	
Remove			- AND - 9	- 177 - 177 - 178 - 178
4) Change			P	
Add			2: 1,2	1130. 1130.
Remove				OA.
5) Change				_
Add				-
Remove				-
6) Change				_
Add				-
Remove				_

Attach additional sheets, if necessary).	(Be specific)		
			
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			_
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		=	2 - j 3 - S - L
		-	52
			- (A)
		PH 12: 42	717
f an amendment provides for an excha	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:	 	22.2
(if not applicable, indicate N/A)	ument if not contained in the amendment itself:	N	DΑ
			-
			_
			_
		 -	-

The date of each amendment(s) a	doption:	, if othe	r than the
date this document was signed.			
06/ Effective date <u>if applicable</u> :	01/15		
Effective date in applicable.	(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 date will epartment of State's records.	l not be lis	ted as the
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.		
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):		
"The number of votes cas	t for the amendment(s) was/were sufficient for approval		
by	(voting group)		SIS
	(voting group)	Oi C	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	9 - MUL	NETARY NETARY
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	PH 12: 42	EF TLO
06/05/15 Dated	Ann March	42	RIDA
Signature	- State - Comment of the state		
	director, president or other officer – if directors or officers have not been		
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court		
	nted fiduciary by that fiduciary)		
	AARON MARAMBIO		
	(Typed or printed name of person signing)	<u> </u>	-
	PRESIDENT		
	(Title of person signing)		-