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SECRUTARY OF STATE
ALLAHASSEE, FLORID

FILED R 21 PHI2: 22

C. LEWIS

MAR 2 4 201.*

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations			
AME OF CORPORATION: PR Auto Sales & Repair Inc.			
OCUMENT NUMBER:			
he enclosed Articles of Amendment and fee are submitted for filing.			
lease return all correspondence concerning this matter to the following:			
Pedro Rosario Name of Contact Person PR Auto Sales + Repair Inc. Firm/Company			
DP Auto SAlesy Reserving			
Firm/ Company			
5151 SOBT. SuiteB			
Address			
Orlando Florida 32839			
Orlando Florida 32839 City/State and Zip Code			
Prauto de a la Omail. Com E-mail address: (to be used for future annual report notification)			
or further information concerning this matter, please call:			
Pedro Rosario at (467) 914-4036 Name of Contact Person Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
nclosed is a check for the following amount made payable to the Florida Department of State:			
\$\\$35 \text{ Filing Fee} \$\subseteq \$\subse			
Mailing Address Amendment Section Street Address Amendment Section			

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

APPROVED AND FILED

Articles of Amendment to Articles of Incorporation

14 MAR 21 PH 12: 22

of

SECRETARY OF STATE

PR Auto Sales + Repair Inc.	TÄLLÄHÄSSEE, PLORIDA
(Name of Corporation as currently filed with the Fl	orida Dept. of State)
P130000 75609	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Covord "chartered," "professional association," or the abbreviation "Inc."	Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable:	5151 South Orange blossom Trail
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite B
	orlando Florida 32839
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5151 South Orange blosson Train
(muning united MAT DE AT OST OFFICE BOA)	suite B
	<u> </u>
	Orlando Florida 32839
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent NA	
· 1	
(Florida stre	et address)
New Registered Office Address: NA	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
NIH.	
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>	<u>Name</u>	<u>Addres</u> s
1) Change		- NA	
Add Remove		1	
2) Change		_ N/A	
Add Remove		0110	
3) Change		_ N A	
Remove		N) /o	
4) Change		N A	
Remove		. }	
5) Change		N/A	
Remove		. 1	
6) Change		N A.	
Add Remove		·	

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 NA)	assification, or cancellation of issued shares,		rticles, enter chang . (Be specific)	ela) nele:		
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N/A		(if not applicable, indicate N/A)	endment if not col	itained in the am	endment itself:	
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The date of each amendment(s) adoption:date this document was signed. Effective date if applicable:	Sept 12, 201	3 14 MAR 21 PH 12: 22 If other than the SECRETARY OF STATE TALLAHASSEE, FLORIDA mendment file date)
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for The amendment(s) was/were approved by the must be separately provided for each voting.	approval. he shareholders through voting gro	ups. The following statement
"The number of votes cast for the ame	endment(s) was/were sufficient for	approval
by		."·
The amendment(s) was/were adopted by the action was not required.	e board of directors without shareh	older action and shareholder
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholde	r action and shareholder
Dated 2 13 14 Signature Zells	Rozario	
(By a director, pre	sident or other officer – if director corporator – if in the hands of a rec	
	y by that fiduciary)	erver, audice, or other court
PENE	ROSARIO	
	(Typed or printed name of	TRESIDEAUT
	(Title of person sign	// <i>Columning</i>)