P13000093418

(Requ	iestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO: Amendment Section Division of Corporations							
NAME OF CORPORATION: VETERAMS Automotive Free DOCUMENT NUMBER: P13000093418							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Soseph Paul Marchisella Name of Contact Person Veterans Automotive Inc. Firm/ Company 5002 Airport RD. Address 2ephyrh.11s, 1-1, 33542 City/ State and Zip Code Vetatoine @gmail.com E-mail address: (to be used for future annual report notification)							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Toseph MARC H. Sell A at (813) 715-6180 Name of Contact Person Area Code & Daytime Telephone Number							
Enclosed is a check for the following amount made payable to the Florida Department of State:							
□ \$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) □ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)							
Mailing Address Amendment Section Street Address Amendment Section							

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment to Articles of Incorporation of

1/eterrors and s Antomotive For	
(Name of Corporation as currently filed with the Florida Dept. of State)	•
P13000093418	
(Document Number of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	g amendment(s) to
A. If amending name, enter the new name of the corporation:	
not Applicable	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the according "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	_ bbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	· 14 18 18 18 18 18 18 18 18 18 18 18 18 18
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	0 Fig. 33
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Soseph Paul March: sella 5002 Aieport Road.	-
New Registered Office Address: ZCPHYRHIVS Florida 33542 (City) (Zip Code)	-
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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 <math>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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	se Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	<u>D</u>	Joseph Paul MARCHISELLA	3434 Allen RD. ZefhypHills, Fl. 33541
Remove 2) Change Add	\checkmark	Dominic RAPPA	39032 MANOR DR. ZeptypHills, F1. 33542
Remove 3 Change Add	TD	Leslie Jo MARCHISCHA	3434 Allen RD. Zephyan:11s, Fl 33541
Remove 4) Change Add Remove		NA	
5) Change		_N/A	
Change Add Remove		MA	

1	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)
	A/A
•	
•	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)
	NA
	JUTA
_	
_	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: /// LE/ 4 (no more than 90 days after amendment file date)	<u> </u>
(no more than 40 days after amenament 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)	
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 4/7/2014	
Signature	
(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)	
Toseph Paul MARCHISELLA (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Sirector (Title of person signing)	
(Title of person signing)	_