## P13000100112

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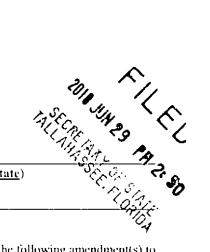
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Car Spot of Cent	ral Florida Inc.				
DOCUMENT NUMBER: P13000100112					
The enclosed Articles of Amendment and fee are su	ibmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Robert DiGiacomo					
	Name of Contact Person				
Car Spot of Central Florida	Car Spot of Central Florida Inc.				
	Firm/ Company				
4191 Chardonnay Drive					
<del></del>	Address				
Viera, FL 32955					
	City/ State and Zip Code				
s diginaama@yahaa aam					
r.digiacomo@yahoo.com	sed for future annual report notification)				
E-mail address, (to de di	sed to rutaire annual report notification)				
For further information concerning this matter, pleas	se call:				
Robert DiGiacomo	at () 304-9837				
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 ☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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, F1, 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of



Car Spot of Central Florida Inc.

(Name of Corporation as Curren	tly filed with the Florida Dept. of State)
P13000100112	``^?\``
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	4170 North Hwy 1
(Principal office address MUST BE A STREET ADDRESS)	Melbourne. FL 32935
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	4170 North Hwy 1
	Melbourne, FL 32935
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address N/A  Name of New Registered Agent	
new registered agent and/or the new registered office addres	
new registered agent and/or the new registered office address  Name of New Registered Agent  (Florida s	
new registered agent and/or the new registered office address  N/A  Name of New Registered Agent	<u>w:</u>

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>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) N/A Change			
Add			
Remove			<del></del>
2) N/A Change			
Add			
Remove			
3) N/A Change			
Add			
Remove			<del></del>
4) N/A Change			
Add			
Remove			<del></del>
5) N/A Change	···		
Add			
Remove			
6) N/A Change			
Add		<del></del>	
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary).—(Be specific)
N/A
P. Hannandan and American Science and American Scie
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

	7/1/18	
The date of each amendment(s) a	doption:	, if other than th
date this document was signed.		
7/1/ Effective date <u>if applicable</u> :	18	
mettive date in appreciate.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, this department of State's records.	late will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad- by the shareholders was/were si	opted by the shareholders. The number of votes east for the amendment afficient for approval.	.(s)
	proved by the shareholders through voting groups. The following staten each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
6/28/18 Dated		
Signature/		<del></del>
	frector, president or other officer - if directors or officers have not beer	
	d, by an incorporator – if in the hands of a receiver, trustee, or other countries in the state of the state	urt
аррон	ted fiduciary by that fiduciary)	
	Robert DiGiacomo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>