P1400018516

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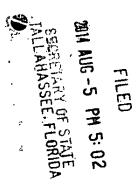
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0 R 8/15/14

TO: Amendment Section

Divis	ion of Corporations		* * * * .			
NAME O	F CORPORATION: AUTOLAN	D SUPERS	STOR	EINC.		•
	ENT NUMBER: P1400001851					: *
The enclos	sed Articles of Amendment and fee are s	ubmitted for filing.				
Please retu	irn all correspondence concerning this ma	atter to the followin	ng:			. ,
	ROBERT J. HUT	CHINS				
	AUTOLAND SU	Name of Conta	,			-
	6400 USHWY19	Firm/Com	npany			-
·	PINELLAS PARI	· •	SS		- (1.)	₹
		City/ State and	Zip Code			-
	AUTOLAND64@GM					
For further	E-mail address: (to be u	- 4	ai report	notification)	e a company	
ROBE	RT HUTCHINS	at (72	27	, 526 8500		
	Name of Contact Person	at (Area Co	de & Daytime Telepl	none Numbe	
Enclosed is	s a check for the following amount made	payable to the Flor	rida Depa	rtment of State:	•	
□	ling Fee \$\Bigcup \Bigcup \\$43.75 \text{ Filing Fee & Certificate of Status}	□\$43.75 Filing Certified Cop (Additional co enclosed)	y	□\$52:50 Filing Fe Certificate of Sti Certified Copy (Additional Cop is enclosed)	atus	
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circ ssee, FL 32301	le	

Articles of Amendment to Articles of Incorporation

of

FILED.

AUTOLAND SUPERSTORE INC	C	mu Alla -5	b# 2:05		
(Name of Corporation as currently fi	led with the Flori	da Dept. of State)	V OF STATE	<u> </u>	
AUTOLAND SUPERSTORE INC		SESTIMAN	Y OF STATE EE. FLORIDA		
(Document Number of	Corporation (if kn	own)	ند.		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Floa	rida Profit Corporal	ion adopts the following	ng amendment	(s) to
A. If amending name, enter the new name of the co	orporation:				
		•		. The new	
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	," "Inc," or "Co"	". A professional co	corporated", or the a prporation name must	bbreviation	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD				- · ·	
C. Enter new mailing address, if applicable:	- 	-4	1	-	
(Mailing address MAY BE A POST OFFICE BO	<i>X)</i>		·	- .	
	-			_	
	<u>,</u> -			- .	
D. If amending the registered agent and/or register		in Florida, enter th	e name of the		
new registered agent and/or the new registered	office address:			,	
Name of New Registered Agent			<u> </u>	,	
			•		
	(Florida street d	address)	•		
New Registered Office Address:		. Fl	orida		
	(City)	,	(Zip Code)	-	
•			Register Control	10 m	
N. B. M. M. M. G.					
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with	and accept the oblic	rations of the position		
			and position,		
Signature of Ne	w Registered Ager	nt, if changing			
- G	G	7			

address of each Office (Attach additional shee Please note the officer/of P = President; V = Vic Executive Officer; CFO held: President, Treasu Changes should be note	er and/or Director ts, if necessary) director title by the e President; T= Tr O = Chief Financia rer, Director would ed in the following eaves the corporat	being added: first letter of the office title: reasurer; S= Secretary; D= Director; TR= al Officer. If an officer/director holds more d be PTD. manner. Currently John Doe is listed as th ion, Sally Smith is named the V and S. Thes by SV as an Add.	Trustee: C = Chairman or Clerk; CEO = Chiefe than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is e should be noted as John Doe, PT as a Change,
X Remove	<u>V</u> <u>Mike</u> .	Jones ,	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PRES	ROBERT J. HUTCHINS	6400 USHWY19N, UNIT 2
Add			PINELLAS PARK,
Remove			FL 33781
2) Change	PRES	MOSHANA S. LEWIS	10821 62 AVE
Add		·	SEMINOLE, FL 33772
Remove			
3) Change		<u></u>	
Add			
Remove	\$ *		
4) Change			
4) Change			,
Remove	•		
Kemove	•		
5) Change			
Add			
Remove			·
6) Change	·		en e
Add		,	
Remove			

•	nal sheets, if necessary).	(Be specific)					
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f an amendme	ent provides for an excl	hange, reclassifica	tion, or cancel	lation of issu	ed share	<u>s,</u>	
provisions for	r <mark>implementing the ame</mark> plicable, indicate N/A)	ndment if not con	tained in the a	mendment i	self:	_	,
(у ног арр	nicane, maicile WA)						•
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•			:		• •,	* *	_ 23
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		••					

The date of each amendment(s) adoption:		, if other than the
date this document was signed.	•	
Effective date if applicable:		
(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 ame by the shareholders was/were sufficient for approval.	ndment(s)	
The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	g statement t(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 sl action was not required.	nareholder 	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older	
Dated 06/11/2014		
Signature Bohn blute him		
(By a director, president or other officer – if directors or officers have a selected, by an incorporator – if in the hands of a receiver, trustee, or o appointed fiduciary by that fiduciary)		
ROBERT J. HUTCHINS		
(Typed or printed name of person signing)		•
PRESIDENT	,	
(Title of person signing)		•