## P14000021359

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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corpora				
NAME OF CORPORA	FION: AND S	source of F	Twide Inc	
DOCUMENT NUMBER	r: <u>5</u>			
The enclosed Articles of	Amendment and fee are sub	omitted for filing.		
Please return all correspo	ndence concerning this mat	ter to the following:		
	Tim	otly Knot		
		Name of Contact Persor	1	
<del></del>		Firm/ Company		
	2374 NE BI CT			
Address				
	Tompero De		330/7	
,	, , , ~	City/ State and Zip Code		
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:				
-T 4	(,	904	1001-001	
Name of	Contact Person	at (at (Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
<b>☑</b> \$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)	
	g Address		Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. B	ox 6327	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Tallahassee, FL 32314



December 15, 2016

TIMOTHY KNOX 2374 NE 8TH CT POMPANO BEACH, FL 33062

SUBJECT: AUTO SOURCE OF FLORIDA INC

Ref. Number: P14000021359

We have received your document for AUTO SOURCE OF FLORIDA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 605.0206, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

( PRINTED IN INK IS ACCEPTABLE, BUT PRINTED NEATLY )

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain Regulatory Specialist II

Letter Number: 616A00026664

## Articles of Amendment

to

## **Articles of Incorporation**

(Name o	ce of Tlorida In	lorida Dept. of State)
	(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit Co</i>	rporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
	if applicable: TREET ADDRESS )  cable:	
D. If amending the registered agent and new registered agent and/or the new	d/or registered office address in Florida, en	ter the name of the
Name of New Registered Agent		SONDANO PAULE PL 33325
New Registered Office Address:	(Сту	, Florida(Zip Code)
nes negment opice names.		

If amending the Officers and/or Directors, cuter 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: <u>X</u> 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>	Name	<u>Addres</u> s
1) 2 Change	P	MERION BRUNO SANDANO	1173 SW 118 FEREDNUE
Add			DAVIE FL 33325
Remove			
2) Change		tinoth knox	2374 NE 8th ct
Add			Pompono BCH FL 33062
_ ★ Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) HER ION BRUND SANDAND IS NOW 100 / OF AUTO Florion HERLON B SANDAND QGMADL COM 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)

The date of each amendment(s) adoption: December 27, 2016 if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east 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 12 2 7 1 16
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)
timoth RNOX
(Typed or printed name of person signing)
O C.E.O
(Title of person signing)