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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: TREASURE COA	ST CAR FINDERS INC	
	BER: P14000024533		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	RONDAL JONES		
	77117	Name of Contact Person	l
	TREASURE COAST CAR F	INDERS INC	
		Firm/ Company	
1320 SE FEDERAL HIGHWAY SUITE 109			
		Address	**************************************
	STUART FLORIDA 34994		
		City/ State and Zip Code	2
	JONE	SRONDAL@GMAIL.COM	1
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
RONDAL JONES		at (772	de & Daytime Telephone Number
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
S35 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)
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation

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of

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TREASURE COAST CAR FINDERS IN	1C	A CARCAGO TO	ARY GE SINSE	
(Name)	of Corporation as currently t			
P14000024533				
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this FI	orida Profit Corporat	ion adopts the following amend	ment(s) to
A. If amending name, enter the new na	ame of the corporation:			
			The n	ten:
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or "Ce	o". A professional co		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				_
		·		_
				_
C. Enter new mailing address, if apple	icable:			
(Mailing address MAY BE A POST				_
				_
				_
D. If amending the registered agent ar new registered agent and/or the ne		is in Florida, enter th	e name of the	
Name of New Registered Agent			<u> </u>	
	1320 SE FEDERAL HIGHW	VAY SUITE 109		
	(Florida stree	t address)		
New Registered Office Address:	STUAR	T	. Florida	
	(0	lity)	(Zip Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: tered avent I am familiar wit	th and accept the obliv	rations of the position	
· · · · · · · · · · · · · · · · · · ·		The same and the same same	and the promise.	

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 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	MATTHEW MARK JONES	1320 SE FEDERAL HIGHWAY
X Add			SUITE 109
Remove			STUART FLORIDA 34994
2) Change	D	SAMMY LEE MIKE SR.	1320 SE FEDERAL HIGHWAY
X Add		_	SUITE 109
Remove			STUART FLORIDA 34994
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach <i>additional sheets, if necessary).</i>	(Be specific)	
		
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
		_,

• •	OCTOBER 17, 2017	
The date of each amendment(s)	adoption:	, if other than th
date this document was signed.	CTOBER 17, 2017	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	s block does not meet the applicable statutory filing requirements, this date will no Department of State's records.	ot be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
■ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
	ER 17, 2017	
DatedSignature	Mondel Le	
(By a selec	a director, president or other officer of directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court minted fiduciary by that fiduciary)	
	RONDAL JONES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	