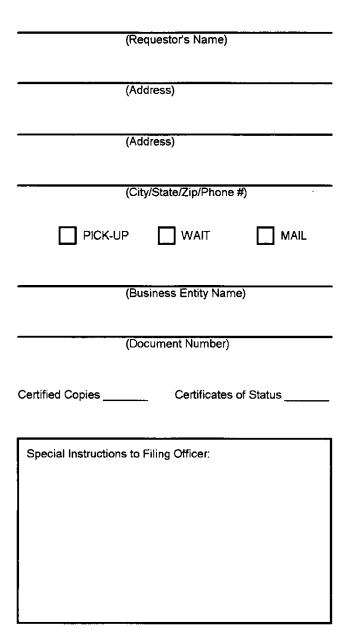
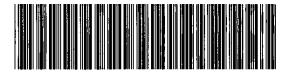
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

V HERRING APR 1 9 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: G & C AL	JTO SALES II	NC
DOCUMENT NUMBER: P140000296	673	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this man	tter to the following:	
NATALIE REY	NOSO	
G & C AUTO S		n ,
5223 E BROAI	Firm/ Company OWAY AVENU	JE
TAMPA, FLOR	Address IDA 33619 City/ State and Zip Cod	e
FLORIDA		
	ed for future annual report	
For further information concerning this matter, pleas	•	000 040=
GILBERTO FARIGUA	at (813	<u>,</u> 362-6435
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	irtment of State:
\$35 Filing Fee \$\text{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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

G&C AUTO SALES INC

2017 APR 17 AM 7: 35

(Name of Corporation as	currently filed with the Flo	rida Dept. of State)	7
P1400029673		1	
(Documer	nt Number of Corporation (if k	cnown)	-
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na C&N AUTO SALES I			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	" "company," or "incorporated" or the a o". A professional corporation name must A."	bbreviation
B. Enter new principal office address,	if applicable:	SAME	_
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		_
			-
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	icable: OFFICE BOX)	SAME	_
			_
			_
D. If amending the registered agent an new registered agent and/or the new		s in Florida, enter the name of the	
Name of New Registered Agent	N/A		
<u>Name of New Registered Agent</u>			
	(Florida street	address)	
New Registered Office Address:	N/A	, Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist	ered agent. I am familiar wit	h and accept the obligations of the position.	
Sio	gnature of New Registered Age	ent, if changing	
5.0		, , , , ,	

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 Do	<u>oe</u>			
X Remove	<u>v</u>	Mike Jo	nes			
X Add	<u>sv</u>	Sally Sn	nith_			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
1) Change		_	N/A	 		
Add						
Remove						
2) Change		<u> </u>	- Williams	 ····		
Add						
Remove						
3) Change				 		
Add						
Remove						
4) Change		_		 · .		
Add						
Remove						<u>.</u>
5) Change		_		 		
Add						
Remove					<u> </u>	
6) Change				 		
Add				 		
Remove			•			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A

,
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 .

The date of each amendment(s) adoption: 01/01/2017	, if other than the
date this document was signed.	•
Effective date <u>if applicable</u> : 01/01/2017	_
(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 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 04/13/2017	•
Dated	
Signature Att &	
(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)	
NATALIE REYNOSO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	