P14000029673

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TALL AHASSEE, FLORIDA

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COVER LETTER

Division of Corporations NAME OF CORPORATION: C&N AUTO SALES INC DOCUMENT NUMBER: P14000029673 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CARLOS REYNOSO Name of Contact Person C&N AUTO SALES INC Firm/ Company 5223 E. BROADWAY AVENUE Address **TAMPA, FL 33619** City/ State and Zip Code CRAUTOREPAIRTAMPA@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 966-9728

Area Code & Daytime Telephone Number CARLOS REYNOSO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$52.50 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Street Address
Amendment Sec

Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

C&N AUTO SALES INC

Check if applicable

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporation as c	urrently filed with the Florida Dept. of State)	0,22	27
P14000029673		7	
(Document Nu	imber of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this <i>Florida Profit Corporation</i> adopts the follow	ing amendm	ient(s) to
A. If amending name, enter the new name of the corporal	tion:		
		7he ner	11'
name must be distinguishable and contain the word "corporat "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	Co". A professional corporation name must cont	tion "Corp., am the wor	d
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(muting dutiess marting it to the total)			
D. If amending the registered agent and/or registered off	ice address in Florida, enter the name of the		
new registered agent and/or the new registered office:	address:		
Name of New Registered Agent			
di di	lorida street address)		
New Registered Office Address:	, Florida		
	(Ciţy) (Zi	(p Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	d Agent: amiliar with and accept the obligations of the position	n.	
· · · · · · · · · · · · · · · · · · ·	of New Registered Agent, if changing		
Mgnature o	y wew wegistered agent, y 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)

Example:

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.

X Change	PT	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	VP	ALBERTO AYALA	13691 PRADDINGTON WAY
Add			SPRING HILL, FL 34609
X Remove 2) Change	Т	JOEL AYALA	8008 Canterbury Lake Blvd
Add			TAMPA, FL 33619
X Remove Change	VP	NATALIE REYNOSO	308 SPRINGDALE PL
X Add			TEMPLE TERRACE, FL 33617
Remove 4) Change			
Add			
Remove 5) Change			
Add			
Remove 6) Change			
Add			
Remove			

(Attach additi	or adding additional Art ional sheets, if necessary).	(Be specific)			
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F. If an amend	lment provides for an exc	hange, reclassifica	ition, o <u>r cancellati</u>	on of issued shares.	
provisions	for implementing the am	endment if not cor	itained in the amo	ndment itself:	
(if not a	applicable, indicate N/A)				
		<u> </u>			
-		-	_		

•	07182022	
The date of each amendment(s) adoption:		_, if other than the
date this document was signed.		
07/18/2022		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Departmen	es not meet the applicable statutory filing requirements, this date will tof State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	the meorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.	
☐ The amendment(s) was/were approved by must be separately provided for each vol	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):	2022 FALL
	mendment(s) was/were sufficient for approval	2022 JUL 22 ALL ARASSE
by	(voting group)	f71 I'
Dated $\overline{Z} - /8 -$		PM 1: 27 F STATE FLORIDA
selected, by an	incorporator – if in the hands of a receiver, trustee, or other court itary by that fiduciary)	
CARLO	OS REYNOSO	
	(Typed or printed name of person signing)	
PRESII	DENT	
	(Title of person signing)	