P14000030494

(Re	questor's Name)	
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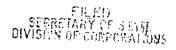
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	AATION: COSMANS AUTO	SALES INC	
DOCUMENT NUME	BER: P14000030494		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	NELSON ENRIQUE CAYC	EDO OSMAN	
		Name of Contact Person)
	COSMANS AUTO SALES I		
		Firm/ Company	
	3612 N FLORIDA AVE	This Company	
		Address	
	TAMPA FL 33603		
		City/ State and Zip Cod	e
000	ANGAUTOCAL FOVALIO	0.004	
	MANSAUTOSALE@YAHO		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
NELSON ENRIQUE	CAYCEDO OSMAN	at (813	7356226
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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 P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



COSMANS AUTO SALES INC

15 AUG 13 PM 3: 40

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P14000030494	
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the co	rporation:
	The new description," "company," or "incorporated" or the abbreviation "Inc." or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>X</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered of New Registered Agent	
IMMO OF THE REGISTER WITGER	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Sign	ature 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 Do	<u>oe</u>		
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) Change	V		CESAR GUILLERMO CAYCEDO (3506 N 12TH ST	
X Add				TAMPA FL 33605	
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
0 9					
6) Change					
Add					
Remove					

			<u> </u>	

an amendment provides for an exch	ange, reclassificati	on, or cancellation	of issued shares,	
orovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not conta	ained in the amend	ment itself:	
,				
				<u> </u>
		·		

The day of each amondment (a)	08/10/15	, if other than the	
The date of each amendment(s) a date this document was signed.	doption:	SERRETARY OF SHAPE DIVISION OF CORPORAL	LAS-
Effective date <u>if applicable</u> :			•
	(no more than 90 days after amendment fi	ile date) 15 AUG 13 PM 3: 4	0
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requepartment of State's records.	irements, this date will not be listed as the	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were as by the shareholders was/were	opted by the shareholders. The number of votes cast for ufficient for approval.	the amendment(s)	
	proved by the shareholders through voting groups. The free reach voting group entitled to vote separately on the am		
"The number of votes can	for the amendment(s) was/were sufficient for approval		
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were a action was not required.	opted by the board of directors without shareholder actio	n and shareholder	
☐ The amendment(s) was/were a action was not required.	opted by the incorporators without shareholder action an	d shareholder	
08/10/15	\mathcal{L}		
Dated	All		
Signature			
(By a	director, president or other officer - if directors or office		
	ed, by an incorporator – if in the hands of a receiver, trus	tee, or other court	
, appo	nted fiduciary by that fiduciary)		
	NELSON ENRIQUE CAYCEDO OSMAN		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		