## P14000043044

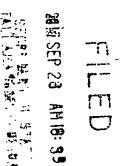
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: VIEW CARS, COF	RP		
	ER: P14000043044			
	f Amendment and fee are sul			
Please return all corresp	oondence concerning this mat	ter to the following:		
	ANA E. AMADO			
<del>-</del> -		Name of Contact Perso	n	
	VIEW CARS, CORP			
_		Firm/ Сонврану		
	701 S.W. 45TH ST BLDG 1	6. BAY 34		
-		Address		
I	DAVIE, FL. 33314			
-		City/ State and Zip Coc	le	
а	nael1211@hotmail.c9om			
		sed for future annual repor	t notification)	
For further information	concerning this matter, pleas	se call.		
ANÆE, AMADO		954 at (	8251568	
Name o	f Contact Person	Area C	ode & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Der	partment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filling Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

VIEW CARS, CORP	Sign of	
(Name of Corporation as current	ly filed with the Florida Dept. of State)	
P14000043044		
(Document Number of	of Corporation (if known)	
rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:  If amending name, enter the new name of the corporation:	Florida Profit Corporation adopts the following amendment	
	The new	
me must be distinguishable and contain the word "corporatio Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
Enter new principal office address, if applicable:	1100 SOUTH STATE RD 7	
rincipal office address MUST BE A STREET ADDRESS )	HOLLYWOOD, FL. 33023	
. Enter new mailing address, if applicable:	1100 SOUTH STATE RD 7	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	Marin 1997	
	HOLLYWOOD, FL. 33023	
. If amending the registered agent and/or registered office add		
new registered agent and/or the new registered office address	<u>ss:</u>	
Name of New Registered Agent		
	n eet address)	
New Registered Office Address:	(Cuv) (Ziv Code)	
	(Cuv) (Zip Code)	
iew Registered Agent's Signature, if changing Registered Agen	ıt:	
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.	
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.

X Change	<u>PT</u>	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>Addres</u> s
1) Change	VΡ	GERARDO AMADO	1100 SOUTH STATE RD 7
XX Add			HOLLYWOOD, FL. 33023
Remove			
2) XX Change	Р	ANA E AMADO	1100 SOUTH STATE RD 7
Add			HOLLYWOOD, FL. 33023
Remove			
3 i Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

	09/25/2017	, if other than the
The date of each amendment(s) date this document was signed.	adoption:	If Other than the
	0/25/2017	
Effective date <u>if applicable</u> :	(no more than 90) days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amen sufficient for approval.	ndment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	statement (s):
	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voung group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sh	archolder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	older
09/25/20	017	
Dated		
selc	a director, president or other officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or officer fiduciary by that fiduciary)	not been ther court
,	ANA E. AMADO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>