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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: TRADITION BER: P1400004319		R INC	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	OSCAR HORACI	O ZAPATA		
		Name of Contact Person	1	
	O. ACCOUNTING			
		Firm/ Company		
	998 SW PROVIN	CETOWN LANE	<u> </u>	
		Address		
	PORT ST. LUCIE	· <u>·</u>		
		City/ State and Zip Cod	e	
oza	ccounting7@Hotr	mail.com	•	
		ed for future annual report	notification)	
For further information	a concerning this matter, pleas	e call:		
Oscar Horaci	o Zapata	_{at (} 772	, 361-3653	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 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)	
	ling Address	Street	Address	
Amendment Section		Amendment Section		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	FIL	
14	NOV -3	PH 12: 27

TRADITION AUTO REPAIR INC

(Name of Corporation as currently filed with the Florida Dept. of State)

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ent(s) to

(Document Numbe	r of Corporation (if kn	own)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Flo</i>	rida Profit Corporation a	dopts the following amendr
A. If amending name, enter the new name of th	e corporation:		
			The ne
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	orp, " "Inc," or "Co	". A professional corpor	
B. <u>Enter new principal office address, if applications of the ASTREET A</u>			
	-		
C. Enter new mailing address, if applicable:	-		
(Mailing address MAY BE A POST OFFICE	<i>BOX</i>)		
	· -		
D. If amending the registered agent and/or regi		in Florida, enter the na	me of the
new registered agent and/or the new registe	red office address:		
Name of New Registered Agent			<u></u>
	(Florida street	address)	_
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registered age	nt. I am familiar with	and accept the obligation	ns 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.

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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	Teresa M. Farmer	1573 SW Jacqueline Ave
Add			Port St. Lucie, FL 34953
Remove			Shares 90%
2) Change	٧	Michael R. Farmer	1573 SW Jacqueline Ave
Add			Port St. Lucie, FL 34953
Remove			Shares 10%
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	a		
Add			
Remove			
6) Change			
Add			
Remove			

	cles, enter change(s) he (Be specific)		
	~.		
Maria de la compania			
			
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*	47 or 18 or		

If an amendment provides for an exch	nange, reclassification,	or cancellation of issue	d shares,
provisions for implementing the ame	nange, reclassification, and ment if not contained	or cancellation of issue d in the amendment its	d shares, elf:
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	or cancellation of issue d in the amendment its	d shares, elf:
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provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	or cancellation of issue	d shares,
. If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) Please add the EIN#46-5673201	ndment if not contained	or cancellation of issue	d shares,

The date of each amendment(s) ado	ption: 10/29/14	, if other than the
date this document was signed.	•	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
The amendment(s) was/were appromust be separately provided for ed	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	15	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated_10/29/14		
Daicu		
Signature	va W) - amsel	
	ector, president or other officer - if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed	d fiduciary by that fiduciary)	
Т	ERESA M. FARMER	
_	(Typed or printed name of person signing)	
P	PRESIDENT	
-	(Title of person signing)	

The date of each amendment(s) adoption: 10/29/14	_, if other than the
date this document was signed.	
Effective date if applicable:	_
(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_10/29/14	
Signature Lasa Marine	_
(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)	
TERESA M. FARMER	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	