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(Ad	dress)
(Ad	dress)
(Cit	y/State/Zip/Phone #)
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(Bu	siness Entity Name)
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SECRETARY OF STATE

Anund 10,14

COVER LETTER

TO: Amendment Section

Division of Corporat	ions		
NAME OF CORPORAT	Ouloss	Automobi	les Corp.
DOCUMENT NUMBER	: <u> </u>	0 13 115	
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspon	ndence concerning this ma	tter to the following:	
_	Anabel	havaa Name of Contact Person	
	J & M	Outomobi	(4)
	16CH1	Firm/Company Sw 18 St.	
_	Miami	Address FL - 331 City/ State and Zip Code	15
	E-mail address: (to be us	autombile sed for future annual report	25 @ amail. com
For further information co	oncerning this matter, pleas	se call:	
Anubel	barúa	at (305	784-3559
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	rtment 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)
Mailing	Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Bo Tallaha	x 6327 ssee, FL 32314		Building xecutive Center Circle
i attana	JUNE 1 LI JEJ LT	2001 1	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TAM AND	mobiles (000:	
(Name of Corporation as currently f	filed with the Florida Dept. of State)	_
914000072	492	
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the followi	ng amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the o o," "Inc," or "Co". A professional corporation name must abbreviation "P.A."	The new abbreviation contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	B: DRESS)	_
		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	14 0CT 20
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:	COMPOSALI COMPOSALI
Name of New Registered Agent		33
	(Florida street address)	
New Registered Office Address:	, Florida(City) (Zip Code)	_
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>sistered Agent:</u> I am familiar with and accept the obligations of the position.	
Signature of Ne	ew 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>РТ</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>	<u>Name</u>		<u>Addres</u> s
1) Change		Joaquin B	onilla	H281 5W 18 SH
Add Remove				Miam, FL 33175
T romare				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	. <u></u>	
		
inge, reclassification, dment if not contains	or cancellation of issued in the amendment it	<u>ed shares,</u> tself:
		<u></u>
 		
		<u> </u>
	ange, reclassification, adment if not containe	ange, reclassification, or cancellation of issundment if not contained in the amendment if

The date of each amendment(s) adoption:	, if other than th
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	
Signature	
(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)	
Prabel barus	
(Typed or printed name of person signing)	
President	
(Title of person signing)	