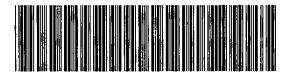
P14000100253

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations E C AUTOMOTIVE INC NAME OF CORPORATION: P14000100253 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Name of Contact Person	
E C AUTOMOTIVE INC		
	Firm/ Company	
15440 TEMPLE BLVD		
	Address	
LOXAHATCHEE, FL 33	3470	
	City/ State and Zip Code	

For further information concerning this matter, please call:

ERIC CHARLES Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee & \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

FIL	En
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PMID	v filed with the Florida Dent. of State) (A.D.	C AUTOMOTIVE INC.
05 05 09	y filed with the Florida Dept. of State 15 /A P. C.	
FINIF	~~££, _F	14000100253
"NOA	Corporation (if known)	(Document Number of
amendment(s)	Florida Profit Corporation adopts the following amo	ursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:
		. If amending name, enter the new name of the corporation:
The new	The	NIA
reviation	n," "company," or "incorporated" or the abbrev Co". A professional corporation name must conta	ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "cord "chartered," "professional association," or the abbreviation ". Enter new principal office address, if applicable:
		Principal office address MUST BE A STREET ADDRESS)
		. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) . If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:
	/n	Name of New Registered Agent
	1.	, ,
	eet address)	(Florida stre
	, Florida	New Registered Office Address:
rde)	(City) (Zip Code)	
		ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w
		hereby accept the appointment as registered agent. I am familiar w

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	<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	VP	STEVE SAINTIL	6301 NW 52 ST
X Add			CORAL SPRINGS, FL 33067
Remove			
2) Change	T	ROSELINE CLEMENT	165 NW 79TH AVE
X Add			MARGATE, FL 33063
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damarra			

Attach ada	litional sheets, if ne	cessary). (Be spe	cific)		
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rovision	ndment provides for implementing to applicable, indicate the applicable, indicate the applicable indic	<u>g the amendment i</u>	classification, or cancel f not contained in the s	lation of issued shares, imendment itself:	
			<u></u> .		
···		· · · · · · · · · · · · · · · · · · ·			
···					
	 				

The date of each amendment(s) adoption: date this document was signed.	, if other than the
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 Department	s not meet the applicable statutory filing requirements, this date will not be listed as the of State's records.
Adoption of Amendment(s)	CHECK ONE)
☐ The amendment(s) was/were adopted by t by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendment(s) or approval.
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):
"The number of votes cast for the ar	nendment(s) was/were sufficient for approval
by	"
	voting group)
☐ The amendment(s) was/were adopted by t action was not required.	he board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by t action was not required.	he incorporators without shareholder action and shareholder
11/06/15 Dated	
Signature	ic chorle
(By a director, p selected, by an i	resident or other officer—if directors or officers have not been ncorporator = if in the hands of a receiver, trustee, or other court ary by that fiduciary)
ERIC C	HARLES
	(Typed or printed name of person signing)
PRESID	DENT
	(Title of person signing)