P15000011720

| (Re | equestor's Name) | |
|-------------------------|--------------------|---------------|
| (Ad | ldress) | - |
| (Ad | ldress) | <u></u> |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| | 1 | | | 5 5 E |
|---|---|--|--|---------------|
| | | COVER LETTER | | 7 |
| TO: Amendment Sect Division of Corpo | | | | |
| NAME OF CORPOR | RATION: PENIEL A | AUTO SERVI | CE INC | 38 |
| DOCUMENT NUME | D4E000044 | | | San San |
| The enclosed Articles | of Amendment and fee are su | abmitted for filing. | | · |
| Please return all corres | spondence concerning this ma | atter to the following: | | |
| | LUIS RAUL RO | ODRIGUEZ | | |
| | | Name of Contact Perso | n | |
| | | Firm/ Company | | |
| | 7004 GLEN C | OVE DRIVE | | . |
| | TAMPA, FL 33 | Address | | |
| | | City/ State and Zip Cod | e | _ |
| | E-mail address: (to be u | sed for future annual report | notification) | |
| For further information | 1 concerning this matter, plea | se call: | | |
| LUIS RODI | RIGUEZ | _{at (} 813 | , 5627355 | |
| Name o | of Contact Person | Area Co | de & Daytime Telephone Nun | nber |
| Enclosed is a check for | r the following amount made | payable to the Florida Depa | artment 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 Fce Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| | ling Address andment Section | | Address ment Section | |
| | sion of Corporations | | on of Comorations | |

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

PENIEL AUTO SERVICE INC

(Name of Corporation as currently filed with the Florida Dept. of State)
P1500011720

در dment(s) to

| poration (if known) | , |
|---|--|
| rutes, this Florida Profit Corporation add | pts the following amend |
| ration; | |
| | |
| 11225 U.S 92 | EAST |
| SEFFNER, FL | . 33584 |
| | |
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| | |
| | of the |
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| | |
| Florida street address) | |
| , Florida | |
| (City) | (Zip Code) |
| ed Agent: | |
| jamiliar with and accept the obligations of | of the position, |
| gistered Agent, if changing | |
| | cation: corporation, " "company," or "incorporation and eviation" or "Co". A professional corporation eviation "P.A." 11225 U.S 92 SEFFNER, FL flice address in Florida, enter the name e address: Florida street address) (City) company," or "incorporation and eviation or "incorporation" or "i |

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 | PT | John Do | <u>e</u> | |
|----------------------------|--------------------------|----------------|---|-----------------|
| X Remove | $\underline{\mathbf{v}}$ | Mike Jo | <u>nes</u> | |
| X Add | <u>sy</u> | Sally Sn | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s |
| 1) Change | | _ | | |
| Add Add | | | | |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | *************************************** | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | - | |
| . Add | | | | |
| Remove | | | | |
| 5) Change | | _ _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| f amending or adding additional Arti Attach additional sheets, if necessary). | (Be specific) |
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| If an amendment provides for an exch | nange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: |
| (g not approach; manual of 1711) | |
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| The date of each amendment(s) adoption: 02/12/2015 | , 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" | |
| 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. | |
| 02/12/2015 | |
| Dated 02/12/2015 Signature Mo Nadveju | |
| 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) | |
| Lis Rodgiquez | |
| (Typed or printed name of person signing) | _ |
| Presidente | |
| (Title of person signing) | _ |