## P15000018136

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SECRETARY OF STATE DIVISION OF STATE

JUL 28 2015 C LEWIS

## COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: SOLUTION CAR, INC						
DOCUMENT NUM	<sub>BER:</sub> P1500001813	6				
	of Amendment and fee are su					
Please return all corre	spondence concerning this mat	iter to the following:				
	CORINA ESPINO	)SA				
		Name of Contact Persor	<u> </u>			
	TAX CARE					
		Firm/ Company				
	1400 NW 107TH	AVENUE STE 2	209			
		Address				
	MIAMI, FLORIDA	33172	•			
	City/ State and Zip Code					
CORINA.SMITH@TAXCAREINC.COM						
	E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:						
CORINA ES	PINOSA	<sub>at (</sub> 786	de & Daytime Telephone Number			
Name 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)			
Mailing Address		Street	Address			

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

FILEB SECRETARY OF STATE DIVISION OF CORECTATION

## Articles of Amendment to Articles of Incorporation of

15 JUL 24 AM 9: 26

SOLUTION CAR, INC  (Name of Corporation as currently filed with the B	Florida Dept. of State)
P15000018136	
(Document Number of Corporation (	if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation" (Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1703 NW 79TH AVE,
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33126
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1703 NW 97TH AVE,
	MIAMI, FL 33126
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address.  Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address: (City)	
(City)	(Zιp Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
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	PT	John Doe		
X Remove	<u>V</u>	Mike Jon	<u>es</u>	
<u>X</u> Add	<u>SV</u>	Sally Smi	<u>th</u>	
Type of Action (Check One)	<u>Title</u>	]	<u>Name</u>	<u>Addres</u> s
1) Change	Р		CARLOS A. MARDENLI	19237 SENECA AVE,
Add				WESTON, FL 33332
Remove				
2) Change	Р	<u> </u>	PEDRO SALAZAR	1703 NW 79TH AVE,
Add				MIAMI, FL 33126
Remove				
3) Change		<del></del> .		
Add				
Remove				
4) Change		. <del></del> .		
Add				
Remove				<del></del>
5) Change				_
Add				
Remove				
6) Change				
Add				
Remove				

	ticles, enter change(s) here: (Be specific)	
<del></del>		
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	house males Gradien as assured that a Circuit shares	
f an amendment provides for an exch provisions for implementing the ame	nange, reciassification, or cancellation of issued snares, endment if not contained in the amendment itself:	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	

FILLE SECRETARY OF STATE DIVISION OF CORFORATIONS

15 JUL 24 AM 9: 26

The date of each amendment(s) adoption: 07/07/2015		
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 ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were acaction was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were acaction was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 07/07/2	2015	
Dated		
Signature	gold	
(By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	_
•	PEDRO SALAZAR	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	