P150000343a

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: ALEXIS AUTO S	ALES, INC	
DOCUMENT NUMBER:	P5000025432		
The enclosed Articles of An		bmitted for filing.	
Please return all corresponde	ence concerning this mat	ter to the following:	
MAN	SES ALEXIS		
	,	Name of Contact Person	
ALE	XIS AUTO SALES, INC	2	<u></u>
-		Firm/ Company	
2308	FOWLER STREET		
*		Address	
FOR	T MYERS, FL 33901		
,		City/ State and Zip Code	2
MYALEXI	SAUTOSALES@GMA	AL.COM	
	E-mail address: (to be us	ed for future annual report	notification)
e e da da da da mana			
For further information con-	erning this matter, picas	se can.	
MANES ALEXIS		239	333-8244
Name of Cor	nact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the t	following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee [□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division of P.O. Box	ent Section of Corporations	Ameno Divisio Ottion 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of

ΔI	1	٠,	۲.	ς	۵	i in	$\Gamma \cap$	5.4	LES.	INC
	1.8	·		. `				. 1 ~		1: 10.

(Name of Corporation as currently t	iled with the Florida Dept, of Sta	te)	
P15000025432			
(Document Number of C	orporation (if known)		-
Pursuant to the provisions of section 607.1006. Florida Statutes, this FL is Articles of Incorporation:	orida Profit Corporation adopts th	e following	; amendment(s
A. If amending name, enter the new name of the corporation:			
ALEXIS AUTO SALES AND AUTO REPAIR, INC			The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co vord "chantered," "professional association," or the abbreviation "P.	1. A professional corporation no	or the ab inie must c	breviation ontain the
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SEGRETA!	18 T
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Name of New Registered Agent	s in Florida, enter the name of the	SEE FLORIDA	8 PH 2: 18
			w .
(Florida sirec	t address)		-
New Registered Office Address:	Flori	ปล	
((Tity)	(Zip (Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w.	ith and accept the obligations of th	e position.	
	oistered Avent 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 <math>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	7	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 i Change			
Add			
Remove			
4)Change			
Add Remove			
Kemeve			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
			<u> </u>
	·		
. <u></u>			
			·
		angulation of issued shares	
If an amendment provides for an exc provisions for implementing the amo	endment if not contained in	the amendment itself:	
(if not applicable, indicate N A)			
			<u> </u>
		,	
			_ ,

The date of each amendment(s)	adoption!	, if other than the
late this document was signed.	JNE 6, 2018	
Effective date if applicable:	3NE 0. 2016	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	s block does not meet the applicable statutory filing requirements, this date of Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	idopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
JUNE 6. Dated	2018	
Dated		
Signature		
(By a selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	ALEXIS MANES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	