P15000026333

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SECRETARY OF STAJE

APR 0 3 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corp	orations				
NAME OF CORPO	RATION: INCOCA	R, CORF	٥.		
DOCUMENT NUMI	P1500026	333			
	of Amendment and fee are su		g.		
Please return all corre	spondence concerning this ma	tter to the follow	ving:		
	Alex Rodrigue	Z			
		Name of Cor	itact Persoi	1	
	FL Tax Group				
		Firm/ Co	mpany		
	1560 Sawgrass Co	rporate Pa	ırkway	4th Floor	
		Addı	ess		
	Sunrise, FL 33	323			
		City/ State an	nd Zip Code	e	
A.1.a			·		
Ale	ex@FLTaxGrou				
	E-mail address: (to be us	sed for future and	nual report	notification)	
For further information	n concerning this matter, pleas	se call:			
Alex Rodrig	juez	at (954	, 999 37 30	
Name o	of Contact Person	· ·	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Fl	orida Depa	irtment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filir Certified Co (Additional enclosed)	рy	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mai	ling Address		Street	Address	
Amo		Amendment Section			
Divi	Division of Corporations				
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					
I alia	anassee, FL 32314			issee, FL 32301	
				•	

Articles of Amendment to Articles of Incorporation of

INCOCAR, CORP				_	
(Name of Corporation as currently file	d with the Florida Dept. of S	tate)	•	_	
P15000026333					
(Document Number of C	Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida sits Articles of Incorporation:	Statutes, this Florida Profit Co.	rporation ado	pts the followin	g amendment	(s) to
A. If amending name, enter the new name of the cor	poration:) (1)	三年 ま	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	" "Inc," or "Co". A professio	or "incorpord onal corporati	ated" or the a	bbreviation contain the	FILED
• •					
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	RESS)		£41 	848 848 848 848 848 848	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX				- - -	
D. If amending the registered agent and/or registere new registered agent and/or the new registered or	d office address in Florida, en ffice address:	iter the name	of the		
Name of New Registered Agent					
,	(Florida street address)				
New Registered Office Address:		, Florida		_	
	(City)		(Zip Code)	_	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept th	e obligations c	of the position.		

Page 1 of 4

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.

Example: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change	VP		Amelia B Zambrano Cedeño	1094 Henry Balch Dr.
Add				Orlando, FL. 32810
Remove				
2) Change	VP		Jose David Carrion Zambrano	1094 Henry Balch DR.
Add				Orlando, FL. 32810
Remove				
3) Change	VP		Jose Dario Carrion Zambrano	1094 Henry Balch Dr.
Add		_		Orlando, FL. 32810
Remove				
4) Change	VP		Briceida Sofia Carrion Zambrano	1094 Henry Balch Dr.
Add				Orlando, FL. 32810
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
16	and realization or agreellation of issued shares
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 03/25/2014	_, 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	
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 03/25/2014 Signature	
(By 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)	
Jose V Carrion Poma	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	-