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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: STARS CAR SALES | , INC |
|--|--|
| DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee are submit | itted for filing. |
| Please return all correspondence concerning this matter | to the following: |
| DOUGLAS SERRA | |
| (| Name of Contact Person) |
| STARS CAR SALES, INC | |
| | (Firm/ Company) |
| 1274 EPSON OAKS WAY | |
| | (Address) |
| ORLANDO, FL 32837 | |
| (1 | City/ State and Zip Code) |
| STARSCARSALES@HOTMAIL.CO | М |
| E-mail address: (to be used f | or future annual report notification) |
| For further information concerning this matter, please co | all: |
| DOUGLAS SERRA | (407) 967-7(at |
| (Name of Contact Person) | (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount made pay- | able to the Florida Department of State: |
| \$35 Filing Fee \$\Bigcup \$ | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is 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

STARS CAR SALES, INC

| 15 | SEP | 21 | 2)) | 2: | 1. 1 |
|----|-----|----|-----|----|------|
| | | | | | |

1.1.7

| (Name of Corporation as currently | filed with the Florida Dept. | of State) |
|--|-------------------------------|----------------------------------|
| P15000031136 | | TALLAHASSEE, FLORION |
| (Document Number | of Corporation (if known) | |
| ursuant to the provisions of section 617.1006, Florida Statutes, mendment(s) to its Articles of Incorporation: | this Florida Not For Profit C | corporation adopts the following |
| . If amending name, enter the new name of the corporation | <u>1:</u> | The new |
| ame must he distinguishable and contain the word "corporatio Company" or "Co." may not he used in the name. | n" or "incorporated" or the c | |
| Enter new principal office address, if applicable: | 195 S INDUSTRIAL DR. | (CHANGE) |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | ORANGE CITY, FL 32763 | 3 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 195 S INDUSTRIAL DR. | (CHANGE) |
| - | ORANGE CITY, FL 32763 | 3 |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent: | | name of the |
| New Registered Office Address: | (Florida street address) | |
| | | , Florida |
| | (City) | (Zip Code) |
| ew Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fami | | ations of the position. |
| Sign | nature of New Registered Ager | nt, 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 X Remove X Add | PT V SV | John Doo Mike Jor Sally Sm | <u>nes</u> | |
|-----------------------------------|---------------|----------------------------------|-------------|---------------------------------------|
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | | _ | | |
| Remove | | | | |
| 2) Change Add | | _ | | |
| Remove 3) Change | | | | |
| Add Remove | | | | |
| 4) Change | | _ | | |
| Add Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| 6) Change | | | | · · · · · · · · · · · · · · · · · · · |
| Add | | | D 2.54 | |

| E. If amending or adding additional Art (attach additional sheets, if necessary). | (Be specific) |
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| N/A | , |
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| The date of each amendment(s) addate this document was signed. | option: | , if other than the |
|---|--|---------------------|
| Effective date <u>if applicable</u> : | <u>'</u> | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block locument's effective date on the Dep | ck does not meet the applicable statutory filing requirements, this date will not partment of State's records. | be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ad was/were sufficient for approva | opted by the members and the number of votes cast for the amendment(s) | |
| There are no members or membadopted by the board of directo | ers entitled to vote on the amendment(s). The amendment(s) was/were rs. | |
| 09/17/201/ Dated | 5 | |
| Signature | | |
| have not bee | man or vice chairman of the board, president or other officer-if directors n selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary) | |
| D | OUGLAS SERRA | |
| | (Typed or printed name of person signing) | |
| | / | |
| P | RESIDENT | |
| ************************************** | (Title of person signing) | |