P15000031791

(Req	uestor's Name)			
(Add	ress)			
(Add	ress)			
(City	/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Bus	iness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to F	iling Officer:			

Office Use Only



600287515216

07/05/16--01010--001 **35.00



JUL 08 2016

C. CARROTHERS

Division of Corporations Oluomo Motors Inc P15000031791 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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

1	Articles of inco	orporación			
Oluomo Ma	ntros	Tinc			
	ortion as augmently	filed with the Florida	Dent of State)		
O L COO	217	G 1	Dept. of State)		
F 15 0000					
(Doc	cument Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>F</i>	Florida Profit Corporati	on adopts the fol	lowing am	endment(s)
A. If amending name, enter the new name of the	corporation:				
	1.6			The	
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	orp," "Inc," or " C	'o". A professional coi	corporated" or cporation name	the abbrev must conta	viation vin the
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)		 			
					- 2
					W.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	DAN)			32 (S) 20 (S) 20 (S)	=
(Mulling dudiess MAT BE A FOST OFFICE I	DOA)				रा ह
				6 - 2 mrs	
D. If amending the registered agent and/or regis new registered agent and/or the new registered		ess in Florida, enter the	name of the	\$10% \$10%	00 :
new registered agent and/or the new registere	ed office audress:				
Name of New Registered Agent					
	(Florida strec	et address)	•		
New Registered Office Address:			, Florida		
	(0	City)		(Zip Code)	
Non-Donishand America Cimera (Colonia) of D					
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	legistered Agent: L. – Lam familiar wi	ith and accept the obliga	tions of the posi	tion.	
	,	, ··· · · · · · · · · · · · · · · · · ·	, ,		
					
Sip	gnature of New Reg	gistered Agent, if changi	ng		

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.

E	re, ana sa	ny sinan, sy as an Add.	
Example: X Change	PT	John Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name Address	
1) Change	CFC	Olayınka Adigun 2131 NW 139 stra Unit 4 Opa Locka Fr 33054	ď
X Add		Unit 4	
Remove		Opa Locka FL 33059	
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 Artic Attach additional sheets, if necessary).	(Be specific)
1	
f an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more man 20 days after amenanem fue date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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):	1
"The number of votes cast for the amendment(s) was/were sufficient for approval	
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.	
Dated July 1 2016	
Signature (By a director, president or other officer – il 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)	
(Typed or printed name of person signing)	
President	

(Title of person signing)