P15000053331

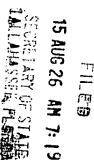
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FABIEN AU	TO SALES INC	
DOCUMENT NUMBER: P15000053331		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
JEAN R. NABOYA		
	Name of Contact Person	1
FABIEN AUTO SALE	S INC.	
	Firm/ Company	
411 NE 164 ST	. ,	
	Address	
MIAMI FL 33162		
	City/ State and Zip Cod	e
JNABOYA@GMAIL.COM		
E-mail address: (to	be used for future annual report	notification)
	,	
For further information concerning this matter,	please call:	
JEAN R NABOYA	at (520-1232
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount n	nade payable to the Florida Depa	ortment of State:
■ \$35 Filing Fee State \$43.75 Filing Fee Certificate of State	e & \$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FABIEN AUTO SALES INC

(Name of Composition or comments.	filed with the Floride Dent of State
P15000053331	filed with the Florida Dept. of State)
(Document Number of O	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	. The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain 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)	
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address:	, Florida City) (Zip Code)
(4	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	A
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position 26 A
Cionatina aCM and Da	gistered Agent, if changing
Stynature of New Re	KISICICA AKCIII, II CHANKINK MENT -

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	р	CARRY HUBERT	411 NE 164 ST
Add X			MIAMI FL 33162
Remove			
2) Change	P	JEAN R. NABOYA	411 NE 164 ST
X Adá			MIAMI FL 33162
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

much duamonas ancess, y necessary).	icles, enter change(s) here: (Be specific)
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A SALES OF THE ASSOCIATION OF THE SALES OF T	
f an amendment provides for an exchange and a second a second and a second a second and a second a second and	hange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	08/21/2015	
Enective date <u>n applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendme ere sufficient for approval.	ent(s)
	re approved by the shareholders through voting groups. The following state ed for each voting group entitled to vote separately on the amendment(s):	ement
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
	/2015	
Dated Signature		
	By a director, president or other officer - if directors or officers have not be	
si a	Elected, by an incorporator — if in the hands of a receiver, trustee, or other copporated fiduciary by that fiduciary)	ourt
	JEAN R. NABOYA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	