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Amend

NOV 22015 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BLESSE	D AUTO GROUP CORP
DOCUMENT NUMBER: P1500006172	
The enclosed Articles of Amendment and	
Please return all correspondence concerni	ng this matter to the following:
SINTIA RAQUEL	MARTINS
	Name of Contact Person
BLESSED AUTO	GROUP CORP
	Firm/ Company
4699 N DIXIE HV	- ·
	Address
DEERFIELD BEA	CH, FLORIDA - 33064
	City/ State and Zip Code
blessedautogroup@gmai	l.com
E-mail addres	s: (to be used for future annual report notification)
For further information concerning this management of the second state of the second s	•
	at (954) 415-6817 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	unt made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filin Certificate o	
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Signature of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

LESSED AUTO GROUP CORP		TALE CRA
(Name o	of Corporation as curren	ally filed with the Florida Dept. of States 30
15000061727		
	(Document Number	of Corporation (if known)
rsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendm
If amending name, enter the new na	me of the corporation:	
		The new
	ation "Corp." "Inc." or	ion," "company," or "incorporated" or the abbreviatio "Co". A professional corporation name must contain th "P.A."
B. Enter new principal office address, if applicable:		4699 N DIXIE HWY SUITE 128
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	DEERFIELD BEACH, FLORIDA-33064
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4699 N DIXIE HWY SUITE 128
		DEERFILLD BEACH, FLORIDA-33064
		dress in Florida, enter the name of the
	new registered agent and/or the new registered office address: SINTIA RAQUEL MARTINS	
Name of New Registered Agent	4699 N DIXIE HWY SU	
		street address)
New Registered Office Address:	DEERFIELD BEACH	. Florida 33064
		(City) Zip Code)

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.

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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	SINTIA RAQUEL MARTINS	4699 N DIXIE HWY SUITE 128
Add			DEERFIELD BEACH,FL-33064
Remove			
2) Change	VP	ANA COSTA REBELLO	4699 N DIXIE HWY SUITE 128
Add			DEERFIELD BEACH,FL-33064
x Remove			
3) Change	VP	CRISTINA TREPIM	386 SW 31 AVENUE
x Add			DEERFIELD BEACH,FL-33442
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Ar Attach additional sheets, if necessary).	. (Be specific)
1 8 ¹¹	
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment 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:	Nogae (sp. par des Britania (17) ₀₀₀ par
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s [;])
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ient
"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 sharehold action was not required.	ler
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
10/20/2015 Dated	
Signature Departur	the decomposition of the same
(By a director, president or other office) - if directors or officers have not been	
selected, by an incorporator + if in the hands of a receiver, trustee, or other coappointed fiduciary by that liduciary)	Af I
SINTIA RAQUEL MARTINS	
(Typed or printed name of person signing)	***
PRESIDENT	
(Title of purson signice)	