## P15000079592

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## COVER LETTER

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Division of Corporations NAME OF CORPORATION: SAMPEDRO MOTORS COMPANY INC DOCUMENT NUMBER: P15000079592 The enclosed Articles of Amendment and fee are submitted for filing Please return all correspondence concerning this matter to the following. FRANCO B CAPOCCIA DA GRACA Name of Contact Person SAMPEDRO MOTORS COMPANY INC himi/Company 1877 TAFT-VINELAND ROAD Address ORLANDO FL 32837 City/ State and Zip Code FRANCOBCD@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407 ) 8001684 Area Code & Daytime Telephone Number FRANCO B CAPOCCIA DA GRACA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Piling Fee □S43-75 Filing Fee & □\$43.75 Filling Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is: Certified Copy enclosed) (Additional Copy is enclosed)

Street Address

Amendment Section

Clifton Building

Division of Corporations

## Articles of Amendment to Articles of Incorporation of

SAMPEDRO MOTORS COMPANY INC.

(Name	of Corporation as current	ly filed with the Floric	la Dept. of State)	
P15000079592				
	(Document Number o	f Corporation (if knows	1)	<del></del> -
Pursuant to the provisions of section 607 its Articles of Incorporation	.1006. Florida Statutes, this	Florida Profit Corpord	ution adopts the followin	g amondment(s) to
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and con "Corp.," "Inc.," or Co., " or the design word "chartered," "professional associa	vation "Corp." "Inc." or	Co" A professional e	incorporated" or the a corporation name must	_The new bbreviation contain the
B. Enter new principal office address,			<u> </u>	
(Principal office uddress MUST BE A STREET ADDRESS)		·		
		<del></del>		
			·	<u> </u>
C. Enter new mailing address, if appl	icable:			
(Mailing address MAY BE A POST	OFFICE BOX)			جي
				<del></del>
				<del></del>
D. If amending the registered agent ar			he name of the	
new registered agent and/or the ne		<del>_</del>		
Name of New Registered Agent	FRANCO B CAPOCCIA	DA GRACA		
	1877 TAFT- VINELAND	ROAD		•
	(Florida si)	cet address)	<u> </u>	-
New Registered Office Address:	ORLANDO		32837	
		(Cin)	, Florida	Code)
			r	
New Registered Agent's Signature, if c				
I hereby accept the appointment as regist	tered agent. I am familiar i	with and accept the obli	gations of the position.	
	6000			
	Signatura at News B	enstored Joent if char	)ering	-

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 Doc	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VT	JULIO R PENA-VILLALOBOS	1877 TAFT-VINELAND ROAD
Add			ORLANDO, FL 32837
X Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			<del> </del>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<del></del>	
<del></del>	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	endment if not contained in the amendment itself:
(if not applicable indicate \$74)	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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, document's effective date on the Department of State's records.	this date 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 amend by the shareholders was/were sufficient for approval.	lment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following s 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	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shar action was not required.	eholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehol action was not required.	der
03/18/2017	
Dated	
(Signature C 1990)	
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	been er court
FRANCO CAPOCCIA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	