## P16000018692

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(Ac	idress)	
(Cit	ty/State/Zip/Phon	e #)
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Allen

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ABELL AUTOMO	TIVE INC.	
DOCUMENT NUMBE	D16000019602		
The enclosed Articles of	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
(	CHRISTINA MARIE ARAU	JO	
_		Name of Contact Person	l
_		Firm/ Company	
1	900 SANS SOUCI BLVD.	• •	
	IODTU MANUEL 22101	Address	
<u>-</u>	ORTH MIAMI FL 33181	City/ State and Zip Code	3
arauio8	97@yahoo.com		
		ed for future annual report	notification)
For further information	concerning this matter, please	e call:	
CHHRISTINA MARIE	ARAUJO	at ( 305	778-9138
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	ayable to the Florida Depa	rtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 lassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ABELL AUTOMOTIVE "INC"

(Name	of Corporation as currently	filed with the Florida Dept. of State)	
P16000018692		•	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this F	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		
	nation "Corp," "Inc," or "C	The new	
B. Enter new principal office address, if applicable:		5981 FUNSTON STREET	
(Principal office address MUST BE A S	TREET ADDRESS )	UNIT A-4	
		HOLLYWOOD FL 33023	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		THE DEED	
D. If amending the registered agent an new registered agent and/or the new		ess in Florida, enter the name of the	
Name of New Registered Agent	CHRISTINA MARIE ARA	OUU	
	1900 SANS SOUCI BLVD	#426	
	(Florida stre	et address)	
New Registered Office Address:	NORTH MIAMI	Florida 33181	
	(	City) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations of the position.	

## 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	ZACHARY R. ABELL	1900 SANS SOUCI BLVD.
Add			#426
X Remove			NORTH MIAMI FL 33181
2) Change	Р	CHRISTINA MARIE ARAUJO	1900 SANS SOUCI BLVD
X Add			#426
Remove			NORTH MIAMI FL 33181
3) Change		<del>-</del> -	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		· <del></del>	
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

date this document was signed.	option:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder
AUGUST 5	2016
selected,	dector, president or other officer—If directors or officers have not been by an incorporator — if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
•	CHRISTINA MARIE ARAUJO
_	
	(Typed or printed name of person signing)
I _	PRESIDENT
-	(Title of person signing)