P16000020746

(Req	uestor's Name)		
(Add	ress)		
(Add	ress)		
(City.	/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	iness Entity Nar	ne)	
(Doc	ument Number)		
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			





100291660471

10/28/16--01009--007 **35.00

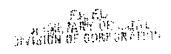
2016 OCT 28 PH 2: 14

OCT 28 2016 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATLANTIC AUTO	O SOURCE INC			
DOCUMENT NUME	BER: P16000020746				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	DON J RASO				
	Name of Contact Person				
	ATLANTIC AUTO SOURCE INC				
		Firm/ Company			
	1865 SW 4TH AVE, SUITE D10				
		Address			
	DELRAY BEACH, FL 3344	4			
		City/ State and Zip Code	e		
DR82	8@HOTMAIL.COM				
· ·	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	561	351-1736		
Name o	of Contact Person	at (at Co	de & Daytime Telephone Number		
	r the following amount made		•		
\$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)		
Mailing Address 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 of

2016 OCT 28 PM 2: 14

f Corporation as currently filed with the	Florida Dept, of State)
(Document Number of Corporation (if	known)
1006, Florida Statutes, this <i>Florida Profit C</i>	orporation adopts the following amendment(s)
me of the corporation:	
	The new
ain the word "corporation," "company," ation "Corp," "Inc," or "Co". A profess tion," or the abbreviation "P.A."	or "incorporated" or the abbreviation ional corporation name must contain the
if applicable:	
	
rahle:	
OFFICE BOX)	
<u>d/or registered office address in Florida, c</u> v registered office add <u>ress:</u>	inter the name of the
DON J RASO	
1865 SW 4TH AVE, SUITE D10	
1003 3 W 41 H A V E, 3011 17 D 10	
(Florida street address)	
	, Florida
	(Document Number of Corporation (if 1006, Florida Statutes, this Florida Profit Come of the corporation: ain the word "corporation," "company," ation "Corp," "Inc," or "Co". A profession," or the abbreviation "P.A." f applicable: "REET ADDRESS") cable: DFFICE BOX) d/or registered office address in Florida, or registered office address: DON J RASO

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	Y	Mike Jones	
X Add	SV	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	ADAM J ACTIPIS	1865 SW 4TH AVE
Add			SUITE D10
X Remove			DELRAY BEACH, FL 33444
2) X Change	P	DON J RASO	1865 SW 4TH AVE
Add			SUITE D10
Remove			DELRAY BEACH, FL 33444
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Demove			

(Attach add	ig of adding additional A litional sheets, if necessary). (Be specific)	<u>(((a) 1161 6</u> .		
· ·					
<u>.</u>					
provision	edment provides for an ex s for implementing the ar applicable, indicate N/A)	nendment if not cor	ation, or cancellat ntained in the ame	ion of issued shares, endment itself;	
					-
					v .
	····				

The date of each amendment(s)	adoption:		, if other than the
date this document was signed.			Augustus Lagrand OF Links
Effective date <u>if applicable</u> :			WINDS PARY OF STAND
	(no more than 90	days after amendment file date	2016 OCT 28 PM 2: 15
Note: If the date inserted in this document's effective date on the D			s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were ac by the shareholders was/were s		number of votes cast for the ame	endment(s)
☐ The amendment(s) was/were ap must be separately provided for		ugh voting groups. The following ote separately on the amendmen	
"The number of votes cas	t for the amendment(s) was/were	e sufficient for approval	
by		,,,	
•	(voting group)		•
☐ The amendment(s) was/were action was not required.	lopted by the board of directors	without shareholder action and s	hareholder
The amendment(s) was/were ac action was not required.	dopted by the incorporators with	out shareholder action and share	holder
10/25/201 Dated	6		
"			
Signature	director president or other offic	er – if directors or officers have	not been
select	* =	hands of a receiver, trustee, or o	
	ADAM J ACTIPIS		
	(Typed or printed r	name of person signing)	
	PRESIDENT		
	(Title o	of person signing)	