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AUG 14 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FERAL MOBILE	CAR DETAIL INC	
DOCUMENT NUMB	P16000027013		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
Į	OSE J ESTRADA		
•••		Name of Contact Person	
l	ERAINFO USA INC		
-		Firm/ Company	
8	75 W 72 PLACE		
_		Address	
I	HALEAH, FL 33014		
_		City/ State and Zip Code	
erainfo	usa@gmail.com		
		sed for future annual report r	notification)
For further information	concerning this matter, pleas	se call:	
JOSE J ESTRADA		at (5232369
Name of	Contact Person	Area Cod	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depar	rtment of State:
□ \$35 Filing Fee	☐S43.75 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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Amendr Divisior Clifton	Address nent Section n of Corporations Building secutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

to

Articles of In	•
FERAL MOBILE CAR DETAIL INC	·
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P16000027013	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
ERAINFO USA INC	The new
name must be distinguishable and contain the word "corporation" (Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	875 W 72 PL
(Principal office address MUST BE A STREET ADDRESS)	HIALEAH, FL 33014
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	875 W 72 PL
	HIALEAH, FL 33014
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
N/A Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New	Registered Agent, if changing

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	PT	John Do	<u>oc</u>	
X Remove	\underline{V}	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3)Change		<u> </u>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	*****	_		
Add				
Remove				
6) Change				
Add			*	
Remove				
Kemove				

Attach additional sheets, if necessary).	(Be specific)
,	
	
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If an amandment provides for an avak	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	/01/2017	
Effective date if applicable:		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date v Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	."	
-, <u>-</u>	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
08/01/20	17	
Dated		
Signature	and	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	JOSE J ESTRADA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	