

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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16 AUG 15 PH 12: 48

Articles of Amendment to Articles of Incorporation

16 AUG 15 PH 12: 48

	Salls INC.
P 160060 29209	TAL BASES SHE PLANTAGE AND THE PROPERTY OF SHEEP CONTINUES OF THE PROPERTY OF
1/60060 27209	
(Docui	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	orporation:
	The new
	ord "corporation," "company," or "incorporated" or the abbreviation p," "Inc," or "Co". A professional corporation name must contain the e abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADDRESS)	
,	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	OX)
(Maning and Co. MATA DE A COST OF FIRE	
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the d office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
Non-Designation of Associate Designation Designation	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with and accept the obligations of the position.
Sia	nature of New Registered Agent, if changing
Dig.	round of their regimen on regain, if considering

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.

Mike Jones, V as Remo Example:	ve, and Sa	dly Smith,	SV as an Add.	
X Change	<u>PT</u>	John D	<u>loe</u>	
X Remove	<u>V</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	\mathcal{N}	<u> </u>	ALie Toseth	1921 H dixiEHWY
Add			V	Pomparo Beach F/33060
Remove				
2) Change				
Add				
Remove				
3)Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
_				
Add				
Remove				
6) Change		_		
Add				
Remove				

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: FOUX STAY AUTO Sales INC DOCUMENT NUMBER: P/600029209
DOCUMENT NUMBER: 7/6000 29209
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Obertha Saint-Ange
Name of Contact Person
Firm/ Company
1921 N DIXIE HWY
Pom Jan & Beach F/33060 City/ State and Zip Code
City/ State and Zip Code
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (954) 729-9581 Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\sum_{\text{\$\subset}}\$

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

The date of each amendment(s) adoption: 08/12/16 , if other than late this document was signed.
Effective date if applicable:
Effective date <u>if applicable</u> : (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 date will not be listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☑ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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 shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 08/12/16
Signature
(By a director, president or other officer - if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Typed or printed name of person signifig)
President
(Title of person' signing)