P16000029471

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

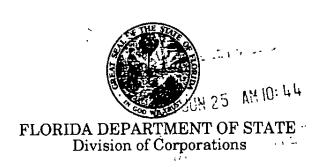
Office Use Only



200364355822

04/22/21--01014--003 -**35.00





June 15, 2021

PERFECT CAR, CORP 7345 W SAND LAKE RD SUITE 215 ORLANDO, FL 32819

SUBJECT: PERFECT CAR, CORP Ref. Number: P16000029471

We have received your document for PERFECT CAR, CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 121A00013316

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

Division of the DO DOV (1997 Melleleness Florida 2021

Articles of Amendment to Articles of Incorporation of

PERFECT CAR, CORP

(<u>Name of Corpor</u> P16000029471	ration as currently filed with the Florida Dept. of State)
(Do	ocument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of th	e corporation:
	The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "h "chartered," "professional association," or the ab	Corporation, "company, or "incorporated" or the abbreviation "Corp., "or," or "Co". A professional corporation name must contain the word observiation "P.A."
B. Enter new principal office address, if applica	able:
Principal office address <u>MUST BE A STREET A</u>	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	R(Y)
(Mutang marcas <u>part pp. 21 (00) (0) 11C12</u>	
	-1
). If amending the registered agent and/or regis	stered office address in Florida, enter the name of the
new registered agent and/or the new register	red office address:
Name of New Registered Agent	<u></u>
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing R	Registered Agent:
hereby accept the appointment as registered agen	t. I am familiar with and accept the obligations of the position.
Sig	gnature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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: <u>X</u> Change	<u> </u>	John Doc	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One)	P, S	SALMA K. CHAMI	2385 W ORANGE BLOSSOM TRAIL
1) Change			APOPKA, FL 32712
Add			
Remove	VP	EDOUARD CHAMI	5220 NW 72 AVE., #11
2) Change			MIAMI, FL 33166
X Add			
Remove 3) Remove			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
_			
			· · · · · · · · · · · · · · · · · · ·
f an amendment provides for an excl	ange, reclassification, or c	ancellation of issued sha the amendment itself:	ires.
provisions for implementing the ame (if not applicable, indicate N/A)	nument if not contained in		
provisions for implementing the ame	numen ii noi Containeo iii		
provisions for implementing the ame	numen ii not containeo iii		
provisions for implementing the ame	numen ii not containeo iii		
provisions for implementing the ame	nument it not contained in		
provisions for implementing the ame	nument it not contained in		
provisions for implementing the ame	nument it not contained in		

.

The date of eadate this docum	ch amendm ent was sign	ent(s) adoption:, if other than, if other than
Effective date	if applicabl	ino more than 90 days after amendment file date)
Note: If the document's effe	ite inserted ective date o	in this block does not meet the applicable statutory filing requirements, this date will not be listed as in the Department of State's records.
Adoption of A	mendment(s) (<u>CHECK ONE</u>)
The amenda action was a		were adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendn by the share	ient(s) was/v holders was	vere adopted by the shareholders. The number of votes cast for the amendment(s)/were sufficient for approval.
☐ The amendn must be sep	nent(s) was/v arately prov	vere approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):
"The n	umber of vo	tes east for the amendment(s) was/were sufficient for approval
by		(voting group)
	()-1/	20/2021
	Dated	
	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) EDOUARD CHAMI
		(Typed or printed name of person signing)
		(Title of person signing)