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(Ad	dress)	
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(Cil	ty/State/Zip/Phone	#)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION:	Jones Auto Group, Inc				
DOCUMENT NUMBER	•	P16000032615				
		1 - 'w - 1 C - CP				
The enclosed Articles of A	<i>menament</i> and tee are su	ibmitted for filing.				
Please return all correspon	dence concerning this ma	tter to the following:				
•		Aida Caraballo				
	Name of Contact Person Coast 2 Coast Auto Sales Firm/ Company					
						
	3087 Wandering Oaks Drive					
	Address					
	Orange Park, Florida 32065					
		City/ State and Zip Code	3			
	C	oast2coastautosales@gmail.	com			
		sed for future annual report				
For further information con	ncerning this matter, plea	se call:				
Leslie	Jones	904 at (294 - 5863			
Name of C	ontact Person		de & Daytime Telephone Number			
Enclosed is a check for the	following amount made	payable to the Florida Depa	rtment of State:			
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address			Address			
Amendment Section		Amendment Section				
Division of Corporations			n of Corporations			
P.O. Box			Building			
Tallahassee, FL 32314		2001 E	xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

16 DEC -9 AM 11: 49

Jones Auto Group, Inc TATE AND THE STATE OF STATE (Name of Corporation as currently filed with the Florida Dept. of State)

P16000032615

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ad	dopts the following amendmen
A. If amending name, enter the new na	ame of the corporation:		
NOT APPLICABLE			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	uation "Corp," "Inc," or	"Co". A professional corpore	orated" or the abbreviation ation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		NOT APPLICABLE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		NOT APPLICABLE	
D. If amending the registered agent an new registered agent and/or the ne			ne of the
Name of New Registered Agent	NOT APPLICABLE		
	(Florida st	reet address)	<u> </u>
New Registered Office Address:	NOT APPLICABLE		. Florida
New Registered Office Address.		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			s of the position.
	,		
	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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	Ā	Mike Jo	ones .	
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	s	_	Aida Caraballo	1271 Cassat Avenue
XAdd				Jacksonville, Florida 32205
Remove				
2) Change		_		
Add				
Remove				
3) Change		<u> </u>		
Add				
Rеточе				
4) Change		_		
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change		_		
Add				
Remove				

L. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
NOT APPLICABLE	
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·	
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' If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
NOT APPLICABLE	
······································	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
December 1, 2016	
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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following smust 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 was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. 	
December 1, 2016 Dated Signature (By a director, president or other officer if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)	
Brian Jones	
(Typed or printed name of person signing)	
President	
(Title of person signing)	