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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AMERICAN SOL	UTIONS AVS, INC		
DOCUMENT NUM	BER: P16000044350			
	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	- Lilling	Name of Contact Person	n	_
		Firm/ Company		_
	104 NW 133RD TERRACE			_
	DAVIE, FL 33325	Address		
		City/ State and Zip Cod	e	_
carsp	olacesales@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
ALVARO J VILLAF	RREAL	954 at (397-4714 ode & Daytime Telephone Numb	
Name	of Contact Person	Area Co	de & Daytime Telephone Numb	er
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
	iling Address endment Section		Address	
	ision of Corporations		Iment Section on of Corporations	
). Box 6327	Clifton	ı Building	
Tal	lahassee, FL 32314	2661 E	Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

AMERICAN SOLUTIONS AVS, INC.

The new tin the word "corporation." "company," or "incorporated" or the abbreviation tion "Corp." "Inc." or "Co". A professional corporation name must contain the on," or the abbreviation "P.A." [applicable: REET ADDRESS] DAVIE, FL 33325 [104 NW 134TH TERRACE UNIT 103 DAVIE FL 33325] DAVIE FL 33325 [Applicable: DAVIE FL 33325] [104 NW 134TH TERRACE UNIT 103 DAVIE FL 33325]		
ne of the corporation: The new tin the word "corporation." "company," or "incorporated" or the abbreviation tion "Corp," "Inc," or "Co". A professional corporation name must contain the on, " or the abbreviation "P.A." [applicable: [Appl	(Name of Corporation as curren	tly filed with the Florida Dept. of State)
006, Florida Statutes, this Florida Profit Corporation adopts the following amendments The new tin the word "corporation." "company," or "incorporated" or the abbreviation tion "Corp," "Inc," or "Co". A professional corporation name must contain the on," or the abbreviation "P.A." [applicable:	P16000044350	
me of the corporation: The new in the word "corporation," "company," or "incorporated" or the abbreviation tion "Corp," "Inc," or "Co". A professional corporation name must contain the on, " or the abbreviation "P.A." Tapplicable: REET ADDRESS) DAVIE, FL 33325 DAVIE FL 33325 ADDRESS 104 NW 134TH TERRACE UNIT 103 DAVIE FL 33325 DAVIE FL 33325	(Document Number	of Corporation (if known)
The new in the word "corporation," "company," or "incorporated" or the abbreviation tion "Corp," "Inc," or "Co". A professional corporation name must contain the on," or the abbreviation "P.A." Tapplicable: REET ADDRESS DAVIE, FL 33325 Able: FFICE BOX DAVIE FL 33325 JOANIE FL 33325 Avie registered office address in Florida, enter the name of the registered office address:	Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	
The new in the word "corporation," "company," or "incorporated" or the abbreviation tion "Corp," "Inc," or "Co". A professional corporation name must contain the on," or the abbreviation "P.A." Tapplicable: REET ADDRESS DAVIE, FL 33325 Able: FFICE BOX DAVIE FL 33325 JOANIE FL 33325 Nor registered office address in Florida, enter the name of the registered office address:	A. If amending name, enter the new name of the corporation:	
tin the word "corporation." "company," or "incorporated" or the abbreviation tion "Corp." "Inc." or "Co". A professional corporation name must contain the on," or the abbreviation "P.A." Tapplicable: REET ADDRESS) DAVIE, FL 33325 Able: FFICE BOX) DAVIE FL 33325 DAVIE FL 33325 Aor registered office address in Florida, enter the name of the registered office address:	CARS PLACE FL, INC	
able: FFICE BOX DAVIE, FL 33325 104 NW 134TH TERRACE UNIT 103 DAVIE FL 33325 /or registered office address in Florida, enter the name of the registered office address:		ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
Able: FFICE BOX DAVIE, FL 33325 104 NW 134TH TERRACE UNIT 103 DAVIE FL 33325 /or registered office address in Florida, enter the name of the registered office address:	B. Enter new principal office address, if applicable:	104 NW 134TH TERRACE UNIT 103
DAVIE FL 33325 /or registered office address in Florida, enter the name of the registered office address:	(Principal office address MUST BE A STREET ADDRESS)	DAVIE, FL 33325
DAVIE FL 33325 /or registered office address in Florida, enter the name of the registered office address:		
or registered office address in Florida, enter the name of the registered office address:	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	104 NW 134TH TERRACE UNIT 103
registered office address:		DAVIE FL 33325
(Florida street address)	D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
(Florida street address)	Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·
, and the start of	(Florida s	street address)
, Florida (City) (Zip Code)	New Registered Office Address:	
(City)	new registered agent and/or the new registered office address Name of New Registered Agent	ss:
	lew Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	
anging Registered Agent: red agent. I am familiar with and accept the obligations of the position.		
		
red agent. I am familiar with and accept the obligations 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.

X Change	PT	John Do	<u>e</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
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				
Pamaya				

(www.monwi.onecta, ij necessur,).	(Be specific)
-	
71 111 111	
	<u></u>
If an amondment provides for an ava	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	03/22/2019	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	22/22/2010	
Effective date if applicable:	03/22/2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment e sufficient for approval.	n(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
3/22/20 Dated	19 Ot	
(By	a director, president or other officer – if directors or officers have not beceted, by an incorporator – if in the hands of a receiver, trustee, or other content of iduciary by that fiduciary)	
	ALVARO J VILLARREAL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	