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| Special Instructions to Filing Officer: |
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Amend Name

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COVER LETTER

| Division of Corpo | rations | | |
|--------------------------|---|--|--|
| NAME OF CORPOR | ATION: 66 | bal Subres | me Auto, Corp |
| DOCUMENT NUMB | er: <u> </u> | 6000044 380 | |
| The enclosed Articles | of Amendment and fee are st | ubmitted for filing. | |
| Please return all corres | pondence concerning this ma | atter to the following: | |
| | Ernee | Name of Contact Person | del Portal Jopez |
| - - | 5125 | Firm/Company E 10 4 | Ave |
| - | Hrah | enh, Fl, 3 | 30 13 |
| | | City/ State and Zip Coo | de |
| | E-mail address: (to be u | sed for future annual report | notification) |
| For further information | concerning this matter, please | se call: | |
| Ernesto I | ose del Portul Contact Person | at (305 Area Co | ode & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida Dep | 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) |
| Maili | no Address | Stroot | Address |

TO: Amendment Section

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

Articles of Amendment

to

Articles of Incorporation

| (Name of Corporation as currently filed with the Florida Dept. of State) | |
|--|-------|
| | |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(its Articles of Incorporation: | s) to |
| A. If amending name, enter the new name of the corporation: Colobal Subreme Auto Corb The new | |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the 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 BOX) | |
| 55 | |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: | |
| Name of New Registered Agent Kafael Monte de Ooa Perez 501 E 38th St | |
| New Registered Office Address: Hiallah, Florida 33013 | |
| (City) (Zip Code) | |
| New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered 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.

| Example: X Change | <u>PT</u> | John Doe | |
|----------------------------|--------------|---|-----------------|
| X Remove | <u>V</u> | Mike Jones | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) 🗶 Change | P | Ernesto Fosé del Portal Ropez | 358 W 58th S. |
| Add | | to pez | Hraleah, Fl |
| Remove | | • | 33012 |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | · — — — — — — — — — — — — — — — — — — — | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| | | | |
| Add | | | |
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| amending or adding additional Arti- ttach additional sheets, if necessary). | (Be specific) | | | | |
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