

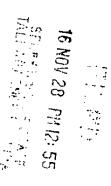
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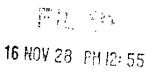


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: J & S CARTS, INC	C			
DOCUMENT NUMB	ER: P16000044669				
	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this mat	tter to the following:			
	SALOMON MIZRAHI				
-	Name of Contact Person J & S CARTS, INC.				
-	Firm/ Company				
	941 KAUSKA WAY				
-	Address				
	THE VILLAGES, FL 32163				
•		City/ State and Zip Cod	e		
SMIZ	RAHI9@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:	·		
SALOMON MIZRAHI		at (265-0137		
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	□\$43.75 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)		
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			

Articles of Amendment to **Articles of Incorporation**



(N)		
 	filed with the Florida Dept. of State)	
P16000044669		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the A."	
B. Enter new principal office address, if applicable:	941 KAUSKA WAY	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	THE VILLAGES, FL 32163	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	941 KAUSKA WAY	
	THE VILLAGES, FL 32163	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	is in Florida, enter the name of the	
Name of New Registered Agent		
941 KAUSKA WAY	**************************************	
(Florida street	,	
(Florida street New Registered Office Address:	t address) , Florida (Zip Code)	

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 <math>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			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) X Change	P	SALOMON MIZRAHI	941 KAUSKA WAY		
Add			THE VILLAGES, FL 32163		
Remove					
2) X Change	VP	JENNIFER L. MIZRAHI	941 KAUSKA WAY		
Add			THE VILLAGES, FL 32163		
Remove					
3) Change					
Add					
Remove					
4) Change	<u> </u>				
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

amenging (attach <i>additio</i>	or adding addition on all sheets, if nece	nal Articles, enter of specif	change(s) here:			
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provisions f	nent provides for or implementing population in the provides indicate indicate in the provides for the provides for indicate in the provides for indicate indicate in the provides for indicat	an exchange, recla the amendment if n N/A)	issincation, or c not contained in	the amendment i	tself:	
	N/A				· · · · · · · · · · · · · · · · · · ·	
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-						

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
Effective date in applicable.	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requiremen epartment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the am ufficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
/	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and share	holder
Dated	11/15/16	
Signature	Dalomon Mizrali	
(Ву а	director, president or other officer - if directors or officers have	
	ed, by an incorporator – if in the hands of a receiver, trustee, or need fiduciary by that fiduciary)	other court
	SALOMON MIZRAHI	
	(Typed or printed name of person signing)	14 10 000
	PRESIDENT	•
	(Title of person signing)	1 W 1