PW000049140

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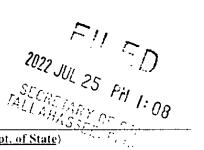


COVER LETTER

FO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: K&N AUTO SAL	ES. INC.	
	BER: P16000049140		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	ERNESTO SANTANA		
		Name of Contact Person	1
,	K&N AUTO SALES, INC.		
		Firm/ Company	
	5011 W. HILLSBOROUGH	AVE STE P	
		Address	
	TAMPA, FL. 33634		
	1 11 111	City/ State and Zip Code	
	ERNESTOSANTANA222@	GMAIL.COM	
	-	sed for future annual report	notification)
For further informati	on concerning this matter, pleases		605 9395
Name	of Contact Person	Area Coc	Je & Daytime Telephone Number
Enclosed is a check (or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.o	niling Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee 8. Monroe Street, Suite 810 essee, FL 32303

Articles of Amendment . to Articles of Incorporation of



K&N AUTO SALES, INC.

(Name of Corporatio	on as currently filed with the Flo	rida Dept. of State)
P16000049140		
(Docum	ent Number of Corporation (if kn	own}
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation;	Statutes, this Florida Profit Corp	oration adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:	
		Thenew
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbrev	or "Co". A professional corp	rporated" or the abbreviation "Corp.," oration name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
Non-Bosistanud Amerik, Singatur, if skapping David		
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.—I	stered Agent: I am jamiliar with and accept the	obligations of the position.

Signature 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.

<u>PT</u>	John De	<u>oe</u>	
<u>V</u>	Mike Jo	<u>ones</u>	
\underline{SV}	Sally St	<u>mith</u>	
<u>Title</u>		<u>Name</u>	<u>Addres</u> s
VP	_	YANET FARIAS MONTERO	7808 SPRINGSIDE LN
	_		TAMPA, FL. 33615
	_		
	_		
	_		
	_		
	V SV Title	V Mike Jo SV Sally So Title	V Mike Jones SV Sally Smith Title Name

Attach additional sheets, if necessary).	(Be specific)
· · · · · ·	
, , <u> </u>	
	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(ў ног аррисаоне, таксане эхл)	

•

	07/22/2022	
The date of each amendment(s) a	doption:	if other than the
date this document was signed.		
	22/2022	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more min 30 days after amenament fite date)	
Note: If the date inserted in this ladocument's effective date on the D	block does not meet the applicable statutory filing requirements, the epartment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholde	r action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendatificient for approval.	nent(s)
	proved by the shareholders through voting groups. The following streach voting group entitled to vote separately on the amendment(s).	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
bv		
07	(voting group)	
07/22/202	7	
Dated		
Signature		
	lirector, president or other officer – if directors or officers have not	peen
	ed, by an incorporator – if in the hands of a receiver, trustee, or other	court
appoir	nted fiduciary by that fiduciary)	
	ERNESTO SANTANA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	