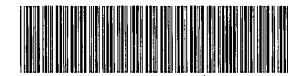
P16000055464

(R	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(C	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Florida Auto Dealer Exports INC
DOCUMENT NUMBER: _ P16000055464
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Henry E Garcia Name of Contact Person
Firm/ Company
9495 NW 27th Ave
Address
Piponi PL 33147 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Henry E. GARCIA at (305) 609-5911 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing 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

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- 4)	7

Florida Auto	sealer E	Exports	INC	
(Name of Corporation as currently f				
P16100	00554	64		
(Document Number of C				
Pursuant to the provisions of section 607.1006, Florida Statutes, this $Florida$ its Articles of Incorporation:	orida Profit Corpor	ation adopts the follo	owing amendn	nent(s) to
A. If amending name, enter the new name of the corporation: Flavida A Arto Dead	ler Inc		The ne	211.
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.	" "company," or " a" A professional	incorporated" or the corporation name m	ie abbreviatio	on
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)				-
C. Enter new mailing address, if applicable:			2018	- ,
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		• .		- <u></u>
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter	the name of the	×1 50: 21	
Name of New Registered Agent				
(Florida stree	t address)			
New Registered Office Address:	<u> </u>	Florida		_
((`ity)		(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	ih and accept the ob	ligations of the posit	ion.	
Signature of New Res	gistered Agent, if ch	anging	_	

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: XChange	<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) Change	_	_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
_ Remove			

ttach additional sheets, if necessar,	Articles, enter cha y). (Be specific)				
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an amendment provides for an e	exchange, reclassi	fication, or canc	<u>ellation of issued s</u>	hares,	
provisions for implementing the s	amendment if not	contained in the	amendment itself	<u>•</u>	
(if not applicable, indicate NA	()				
		·			
				-	_
		·		<u> </u>	_
					-

The date of each amendment(s) adoption: 041218 , if other than the date this document was signed.
Effective date if applicable:
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 04/12/2018 Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
Title of person signing)