P16000075949

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COVER LETTER

		COVER LETTER		4.
TO: Amendment Section Division of Corpo				16 10 1 1 PA 1:57
NAME OF CORPOR	ATION: DRIVE ON, INC.			F Gac
DOCUMENT NUMB	ER: P16000075949			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		2 E
Please return all corresp	pondence concerning this ma	tter to the following:		
	SOBHAN ARA	.FA		
-	<u> </u>	Name of Contact Persor	l	
	DRIVE ON, IN	IC.		
-		Firm/ Company		
	5090 S. STATE ROAD 7			
-		Address		
_	DAVIE FL 33314			
		City/ State and Zip Code	2	
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
SOBHAN ARAFA		at (609	792-7031	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department 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)	
Amer Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301	

Articles of Amendment Articles of Incorporation

DRIVE ON, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P16000075949 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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." 5090 S. STATE ROAD 7 B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) DAVIE FL 33314 C. Enter new mailing address, if applicable: 5090 S. STATE ROAD 7 (Mailing address MAY BE A POST OFFICE BOX) DAVIE FL 33314 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 (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby 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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	P	_	GIL ELBOIM	2624 EMERALD WAY N
Add X Remove				DEERFIELD BEACH, FL 33442
2) Change				
Add Remove				
3) Change				
Add				
Remove				
4) Change				
Remove				
5) Change		<u>. </u>		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
REMOVING GIL ELBOIM AS PRESIDENT OF THE CORPORATION
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption:date this document was signed.	, if other than the
(no more than 90 days after an	nendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of vot by the shareholders was/were sufficient for approval.	tes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gromust be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	approval
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without sharely action was not required.	nolder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholde action was not required.	er action and shareholder
Dated_ Nov 8 / 2016	
Signature	
(By a director, president or other officer – if director	rs or officers have not been
selected, by an incorporator - if in the hands of a re	
appointed fiduciary by that fiduciary)	
Sobhan Arat	
(Typed or printed name of person	a signing)
Presider	\mathcal{J}
(Title of person signi	ng)