P170000 11524

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SECRETARY OF STATE SECRETARY OF CORPORATIONS

brunc

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION:) tever In	<u></u>		
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspo	ondence concerning this mat	tter to the following:			
_	·	Sara Hass Name of Contact Person	<u>an</u>		
_		Auto Fever			
		Firm/ Company	•		
5511 N Nebrasha Pre.					
Address					
		City/ State and Zip Code	<u> </u>		
	E-mail address: (to be us	ed for future annual report	mail·com stification)		
For further information of	concerning this matter, pleas	e call:	<u>.</u>		
Sava	Hassan Contact Person	at () 230.9857		
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	rtment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section n of Corporations Building		

2661 Executive Center Circle

Tallahassee, FL 32301

SELECTARY OF SINISIVE

Articles of Amendment

Articles of Incorporation of

Auto F	ever Inc.
(Name of Corporation as currently f	led with the Florida Dept. of State)
P1700	0011524
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida 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 "Co word "chartered," "professional association," or the abbreviation "P./	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10 ST P 10 ST
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent Name of New Registered Agent	in Florida, enter the name of the
502 El Seren (Florida street	10 Pare Apr 150 Tampa 1 33603
New Registered Office Address: 5511 N N4 Was (Ci.	na Are. Tanya Florida 33604 (Zip Code)
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.

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	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	P	Ahmed Albuelenen	14904 W Hardy Dr. Tampa, FL
Remove 2) Change Add	P	Sara Hassan	33613 502 El Sereno Place Apt 150 Tampa, Pl
Remove 3) Change Add			33204
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
				
<u> </u>				
<u> </u>				
provisions for implementing the an	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:			
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)		-		

The date of each amendment(s) adoption:	9/20/2019	, if other than the
date this document was signed. Effective date if applicable: (no more	9 days after amendment file	de date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reco		rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE	<u>E</u>)	
The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes cast for t	he amendment(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group enti		
"The number of votes cast for the amendment(s) w	was/were sufficient for approval	
by(voting group)		
(voting group)		
☐ The amendment(s) was/were adopted by the board of di action was not required.	irectors without shareholder action	n and shareholder
☐ The amendment(s) was/were adopted by the incorporate action was not required.	ors without shareholder action and	shareholder
Dated 9 20 20 1	19	
Simon Elhon	el	
Signature	ner officer – if directors or officers	s have not been
	if in the hands of a receiver, truste	
appointed fiduciary by that fid	duciary)	
(Typed or p	ned Placelener	
	President	
	(Title of person signing)	