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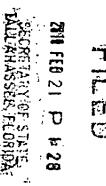
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Jacksonville Acur	a Dealer's Association, Inc.				
DOCUMENT NUME						
The enclosed Articles	of Amendment and fee are si	obmitted for filing.				
Please return all corres	pondence concerning this ma	atter to the following:				
		David Brooks				
		Name of Contact Person	-			
	Regency Motor Co., Inc./ DBA, Duval Acura					
	Firm/ Company					
	11225 Atlantic Boulevard					
	Address					
	Jacksonville, FL 32225					
		City/ State and Zip Code				
	d	avid.brooks@duvalacura.co	n			
	E-mail address: (to be 11	sed for future annual report	notification)			
	concerning this matter, pleas	se call:				
Serena Legg	<u>-</u>	at (_)			
Name o	1 Contact Person	Area Coo	le & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depar	riment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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 Tallahassee, FL 32314		Amendi Division Clifton 2661 Ex	Address nent Section n of Corporations Building secutive Center Circle ssee, FL 32301			

Articles of Amendment to Articles of Incorporation of

Jacksonville Acura Dealer's Association	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P17000015005	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thinks Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
First Coast Acura Dealers, Inc.	77
name must be distinguishable and contain the word "corporati "Corp." "Inc.," or Co., ' or the designation "Corp." "Inc." or word "chartered." "professional association," or the abbreviation	"Co" A professional corneration name units contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
- A CONTROL BOX	
D. If amending the registered agent and/or registered office add	fress in Florida, enter the name of the
new registered agent and/or the new registered office addres	<u> </u>
Name of New Registered Agent N/A	
	reet addressi
New Registered Office Address: N/A	Florida
	City (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	!
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
N/A	
Signature of New I	Registered Agent, if changing
	7. 3.2 191 T

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 necessarys

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	
\underline{X} Remove	V	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		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change	·	_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
A) Ch.			
6) Change			
Add			
Remove			

/A	icles, enter change(s) here: (Be specific)			
· ·				
			· · · · · · · · · · · · · · · · · · ·	
			<u>-</u>	
				
	<u></u>		-	
1			<u> </u>	
				
				
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		— - —		
If an amendment provides for an each	ange, reclassification, or c	ancellation of issued	shares,	
	<u>ndment if not contained in </u>	the amendment itse	<u>lf:</u>	
provisions for implementing the ame				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
(if not applicable, indicate NA)				
provisions for implementing the ame				

The date of each amendment(s	February 15, 2018	
date this document was signed.	atopton.	, if other than the
-	ebruary 15, 2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s sufficient for approval.	;)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	ent
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Februar Dated Signature	15. 2018 \ Auel lack	
(By sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other cour officer by that fiduciary)	t
	David Brooks	
	(Typed or printed name of person signing)	
	Treasurer/ General Manager	
	(Title of person signing)	-