P17000018876

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
PICK-UP MAIT MAIL
$I \setminus$
(Business Entity Name)
(Dusiness Entity Maine)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



800347033248

BUUU47008248 06/23/29-01011--303 **43.75

Cont. 22.00 D. 1. 1.

2020 JUN 29 PH 5: 21

Y SINKER JUN 2 9 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NADA AUTO SAI	LES INC		
DOCUMENT NUM	BER: P17000018876			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	NESSIM FARAG, ABDOUT	П		
	Name of Contact Person			
	NADA AUTO SALES INC			
	Firm/ Company			
	6317 N PALAFOX ST			
	Address			
	PENSACOLA FL 32534			
		City/ State and Zip Code		
	NADAAUTOSALES@GMA	AL.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
NESSIM FARAG, A	вропн	at (6109031	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	iriment of State:	
□ \$35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co 2415 f	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation of

(Name (of Corporation as currently	filed with the Florida Dept. of S	tate)
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:		·	he following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	"orp," "Inc," or "Co". A	mpany," or "incorporated" or the professional corporation name i	abbreviation "Corp"
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS)		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>	i <u>cable:</u> OFFICE BON)		
			7 2
D. If amending the registered agent ar new registered agent and/or the ne		ss in Florida, enter the name of	the 329
Name of New Registered Agent	ADEL HANALLA		
	7791 UNTREINER AVE		ger 😯
	(Florida stree	rt address)	一部
New Registered Office Address:	PENSACOLA	. Flor	32534 ³ *
nen negmeren synee marens.	(((ity)	(Zip Code)
New Registered Agent's Signature, if of I hereby accept the appointment as regis.		th and accept the obligations of th	re position.
	Signature of New Reg	gistered Agent, if changing	
Check if applicable		A D 4	
☐ The amendment(s) is/are being filed p	ursuant to 8, 607,0120 (11) (e	J. 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)

Example:

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.

X Change	<u>P1</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	D	ADEL HANALLA	7791 UNTREINER AVE
X Add			PENSACOLA FL 32534
Remove			
2) Change			
Add			
Remove 3 1 Change			
Add			
Remove			
4) Change			
Add			
Remove			***************************************
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	eles, enter change(s) here: - (Be specific)	
-	- '	
		<u> </u>
		1111
	<u> </u>	
· · · · · · · · · · · · · · · · · · ·		
		- · · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
All The		
an amendment provides for an excl	ange, reclassification, or cancellation	n of issued shares,
	ndment if not contained in the amen	dment itself:
provisions for implementing the ame		
orovisions for implementing the ame (if not applicable, indicate N/A)		
orovisions for implementing the ame (if not applicable, indicate N/A)		
orovisions for implementing the ame (if not applicable, indicate N/A)		
orovisions for implementing the ame (if not applicable, indicate N/A)		· · · · · · · · · · · · · · · · · · ·
orovisions for implementing the ame (if not applicable, indicate N/A)		
provisions for implementing the ame (if not applicable, indicate N/A)		
orovisions for implementing the ame (if not applicable, indicate N/A)		
orovisions for implementing the ame (if not applicable, indicate N/A)		
orovisions for implementing the ame (if not applicable, indicate N/A)		
provisions for implementing the ame (if not applicable, indicate N/A)		
provisions for implementing the ame (if not applicable, indicate N/A)		
provisions for implementing the ame (if not applicable, indicate N/A)		
orovisions for implementing the ame (if not applicable, indicate N/A)		

.

. . . .

The date of each amendment(s) adop	tion:	, if other than the
late this document was signed.		
Effective date if applicable:	November 10/2019	
	(no more than 90 days after amendm	em file date)
Note: If the date inserted in this block locument's effective date on the Depar	c does not meet the applicable statutory filing timent of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors wit	thout shareholder action and shareholder
The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes carrient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approv	red by the shareholders through voting groups. In voting group entitled to vote separately on the	The following statement ic amendment(s):
"The number of votes east for	the amendment(s) was/were sufficient for app)	oval
hy Abdau H	Nessim Forces	·"
Dated Nove	mber 10/2019	
Signature	2	
(Byz-direct	tor, president or other officer - if directors or o	efficers have not been
	y an incorporator – if in the hands of a receiver	trustee, or other court
appointed	fiduciary by that fiduciary)	
	Nessim Fazos Ab Le (Typed or printed name of person sign	30 H
_	(Typed or printed name of person sign	ing)
	Lastisant	
	(Title of person signing)	