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18 APR 20 AHII: 27 SECTION SECTION

R. WHITE
APR 23 2018

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: J A ENTERPRISE AUTO SALES, INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: J A ENTERPRISE AUTO SALES, INC Name of Contact Person JEAN D, YSOPHE Firm/ Company J A ENTERPRISE AUTO SALES, INC Address 7020 NW 7th AVE. MIAMI, FLORIDA 33150 City/ State and Zip Code disophe@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JEAN D, YSOPHE Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 18 APR 20 AMII: 27

SECRETAME SESTATE TALLAHASSEK FLORINA

(Name of Corneration as currently	
(Name of Corporation as currently	filed with the Florida Dept. of State)
A ENTERPRISE AUTO SALES, INC	
(Document Number of C	Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this Fast Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation, Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C ord "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
. Enter new principal office address, if applicable:	7020 NW 7th AVE
Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FLORIDA 33150
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	SS Nº 1 TOTALL CHIEF CHE MAINS OF THE
Name of New Registered Agent	
Name of New Registered Agent	
Name of New Registered Agent (Florida stree	et address)
	et address)

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	<u>v</u>	DANNY ISOPHE	520 NE 155th TERRACE				
X Add			MIAMI, FLORIDA 33162				
Remove							
2) Change							
Add							
Remove							
3) Change							
Add							
Remove							
4) Change							
Add							
Remove							
5) Change							
Add							
Remove							
6) Change							
Add							
Remove							

ittach additional sheets, if	necessary). (Be	enter change(e specific)			
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		. <u> </u>			
		<u></u>			
an amendment provides provisions for implementi (if not applicable, indi	ing the amendme	e, reclassificati	on, or cancellat sined in the amo	ion of issued sha endment itself:	res,
					· <u> </u>
				 .	
	·				•

	04/10/2018	
	otion:	_, if other than the
tlate this document was signed. 04/10/2	2018	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	ck does not meet the applicable statutory filing requirements, this date will rtment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
04/10/2018 Dated		
Signature		
(By a directed, b	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	-
JE	AN DALAIRE	
	(Typed or printed name of person signing)	
PF	RESIDENT	
	(Title of person signing)	