P/7000029598

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JUL 07 2017 S. YOUNG

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:			tomotive Inc
DOCUMENT NUMBER:P	1700002	9598	
The enclosed Articles of Amendment	and fee are submitted	for filing.	
Please return all correspondence conc	erning this matter to th	ne following:	
	Nam	Janu Pea ne of Contact Person	1501
	INalii	ie of Comact i cison	
		Firm/ Company 22 US hw Address	y 41n
*****	Pa	Address 2 W2++0 State and Zip Code	0 FL 34221
E-mail add	JSPea ress: (to be used for f	1500 E Veriz uture annual report n	con.net
For further information concerning thi	s matter, please call:		
Name of Contact Person	Peoison	at (<u>941</u>	737-3534 e & Daytime Telephone Number
Enclosed is a check for the following	amount made payable		
	te of Status Cer (Ad	3.75 Filing Fee & rtified Copy Iditional copy is closed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Division Clifton F	nent Section of Corporations

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

to

7	of	·T
	and Dautomotiv	
(Name of Corpor	ration as currently filed with the Florida	i Dept. of State)
<u> </u>	7000029598 cument Number of Corporation (if known)	
,	•	
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida Profit Corpora</i>	tion adopts the following amendment(s
A. If amending name, enter the new name of the	e corporation:	
		The new
name must be distinguishable and contain the variable. "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the contact of the	orp," "Inc," or "Co". A professional co the abbreviation "P.A."	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		
		The second secon
C. Enter new mailing address, if applicable:		22 F
(Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)	
	-	0 to 3
D. If amending the registered agent and/or regis		ne name of the
new registered agent and/or the new register	red office address:	•
Name of New Registered Agent		
		:
	(Florida street address)	~ . v
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent	Registered Agent: nt. I am familiar with and accept the oblig	gations of the position.
	Signature of New Registered Agent if char	naina

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 = Treusurer; 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	PT John D	loe	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Manager	Joann Pearson	3522 Ushwy 4ln Palmetto FL 3422
XAdd	_		Valmetto FL 3422
Remove			
2) Change	A		
Add			
Remove			- Add (2) (40 (40 (40 (40 (40 (40 (40 (40 (40 (40
3) Change			
Add			the death of the transfer of t
Remove			
4) Change			
Add			
Remove			-1
5) Change			
Add			
Remove			
6) Change			
Add			
Damaua			

	(Be specific)
	The state of the s
	W. 44 pt. 1

in amendment provides for an excha	nge, reclassification, or cancellation of issued shares,
ovisions for implementing the amen	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
n amendment provides for an excha ovisions for implementing the amen (if not applicable, indicate N/A)	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
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ovisions for implementing the amen	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	1
Effective date if applicable: 0/21	[17]
(no more than 90	days after amendment file date)
Note: If the date inserted in this block does not meet the applical document's effective date on the Department of State's records.	ble statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The r by the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throu must be separately provided for each voting group entitled to voting group entitled entitled to voting group entitled enti	gh voting groups. The following statement ote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were	sufficient for approval
by(voting group)	, ,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors was not required.	ithout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators witho action was not required.	ut shareholder action and shareholder
Dated 0/24/2017	
Signature	President
	er – if directors or officers have not been hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
Dul	an Pearson
(Typed or printed na	ame of person signing)
7	Drecident
(Title o	f person signing)