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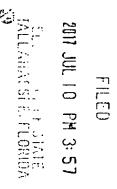
(Requ	iestor's Name)	
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PICK-UP	MAIT	MAIL
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C. GOLDEN

JUL 1 2 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: PINAR AUTO SA	LE,INC	
DOCUMENT NUME	P17000040323		.
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	GEANNE HERNANDEZ		
		Name of Contact Person	1
	PINAR AUTO SALE,INC		
	· · ·	Firm/ Company	
	2083 NW 141 ST		
	<u>- </u>	Address	
	OPA LOCKA, FL. 33054		
		City/ State and Zip Code	٠
	i concerning this matter, pleas		
GEANNE HERNANI		at (
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
2 \$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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

PINAR AUTO SALES INC

2017 JUL 10 PM 3: 57

(N) (C)	
	on as currently filed with the Florida Dept. of State) 13 JAME 1/ALLAFASSEE, FLORIDA
P17000040323	<u> </u>
(Docun	nent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the co	orporation:
	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	d "corporation," "company," or "incorporated" or the abbreviation ," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
	(1 fortua sir ecc dadressy
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent: I am familiar with and accept the obligations of the position.
тиетелу ассерт те арронитені их тедылется идет.	т ит запиши жин ини иссертте отохиитя од те ромнот.
Sion	ature of New Registered Agent, if changing
Signe	ature of New Registered Agent, if changing

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:

(Attack 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.

<u>X</u> Ch	ange	<u>PT</u> <u>Je</u>	ohn Doe	
X Rei	move	<u>V</u> <u>M</u>	like Jones	
<u>X</u> Ac	id	<u>SV</u> <u>S</u> :	ally Smith	
Type o	f Action (One)	<u>Title</u>	Name	Address
i)	_ Change	CEO	GEANNE HERNANDEZ	2083 NW 141 ST
	Add			OPA LOCKA, FL. 33054
<u>X</u>	_ Remove			
2)	_ Change	CFO	GEANNE HERNANDEZ	2083 NW 141 ST
	Add			OPA LOCKA, FL. 33054
X	Remove			
3)	— Change	P	GEANNE HERNANDEZ	2083 NW 141 ST
X	Add			OPA LOCKA, FL. 33054
	Remove			
				
4)	_ Change			
	_ Add			
	Remove			
5)	_ Change			
	_ Add			
	_ Remove			
	KCHAVÇ			
6)	_ Change			
	_ Add			
	Remove			

Attach additional sheets, if necessary).	icles, enter change(s) (Be specific)			
				_
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f an amendment provides for an exc provisions for implementing the ame	nange, reclassification	<u>), or cancellation o</u> ned in the amendm	f issued shares, ent itself:	
(if not applicable, indicate N/A)	nament it not contain	Ted III III and III III		
ty nor uppression, manufaction)				
Cy nor approxime, manage (m)			·	
				,

	06/23/2017		
The date of each amendment(s) addate this document was signed.	doption:		, if other than the
Effective date if applicable:			
	(no more than	90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the apple partment of State's records.	licable statutory filing requirements, thi	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The	he number of votes east for the amendme	ent(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders the each voting group entitled to	arough voting groups. The following state ovote separately on the amendment(s):	'ement
	for the amendment(s) was/we		
by	(voting group)		
	(voting group)		
action was not required.		rs without shareholder action and shareh	
The amendment(s) was/were ado action was not required.	pted by the incorporators wit	thout shareholder action and shareholder	
Signature	23-17.		
selected		icer – if directors or officers have not be the hands of a receiver, trustee, or other of (r)	
	GEAHAE HEA	HANdez	
	(Typed or printed	I name of person signing)	
	Presid	lent.	
•	(Title	of person signing)	

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