## 717000056573

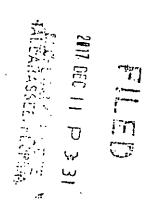
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JC AUTO GROUP	P, INC		
DOCUMENT NUMB				
	of Amendment and fee are su	abmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
,	ARANA, JUSTIN			
-		Name of Contact Person	n	
	IC AUTO GROUP, INC			
-		Firm/ Company		
•	4830 E HTH AVE			
-	Address			
1	HALEAH, FL 33013			
-		City/ State and Zip Cod	e	
jecarsa	mdtrucks@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
ARANA, JUSTIN		at (	608-8716	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

JC AUTO GROUP, INC (Name of Corporation as currently filed with the Florida Dept. of State) P17000050573 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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:

(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 <math>PTD.

Changes should be noted in the following manner. Currently John Doc 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 Doc		
X Remove	<u>v</u>	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	VP	BARNES, ANDRE	4830 E 11 Ave	
X Add			Hialcah FL 33013	
Remove				
2) Change	S	FLORES, MICHELE	10876 ROYAL PALM BLVD	
Add	-		CORAL SPRINGS, FL 33065	
X Remove				
3) Change	T	MARTINEZ, VANESSA	10876 ROYAL PALM BLVD	
Add			CORAL SPRINGS, FL 33065	
X Remove			<del></del>	
4) Change				
Add				
Remove			<del></del>	
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)
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If an amendment provides for an evol-	ange replacification or consultation of issued charge
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an amendment itself:
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The foli- must be separately provided for each voting group entitled to vote separately on the amen	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	and sharcholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	shareholder
Dated	
Signature Justin (Meng	
(By addirector, president or other officer – if directors or officers l	
selected, by an incorporator – if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	e, or other court
The state of the s	
JUSTIN Avang	
(Typed or printed name of person signing)	/n .1 .
William Classica	al resident
(Title of person signing)	1