(Re	equestor's Name)	-
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: #1 Auto Resellers.	INC	
DOCUMENT NUM	BER: P17000070949	<u>-</u>	
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Barbara Rhau		
		Name of Contact Person	n
	#I Auto Resellers, INC		
		Firm/ Company	
	125 NE 32nd ST Apt 1017		
		Address	
	Miami, FL 33137		
		City/ State and Zip Cod	c
1			
	oresellersine@gmail.com	sed for future annual report	notitiontion
	ti-mair address, (to be di	sed for future annual report	Hormeanony
For further information	on concerning this matter, pleas	se call:	
Barbara Rhau		305 at (5050035
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	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)
An Di P.C	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle		Iment Section on of Corporations Building
CHIMINACC, 11, 52019		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation

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#1 Auto Resellers, INC		SECREMENT
(Name o	f Corporation as curren	tly filed with the Florida Dept, of State)
P17000070949		
-	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new na	me of the corporation:	
		The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp." "Inc." or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, i	if applicable:	14905 NW 22nd CT
(Principal office address <u>MUST BE A ST</u>		Opa-Locka, FL 33054
C. Enter new mailing address, if appli (Mailing address MAY BE A POST (<u>cable:</u> OFFICE BOX)	
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	Barbara Rhau	
	125 NE 32nd ST APT 1	017
	(Florida)	street address)
New Registered Office Address:	Miami	. Florida 33137
		(City) (Zip Code)
New Registered Agent's Signature, if classification of the Agent's Signature, if classification is registered. I hereby accept the appointment as registered agent's Signature, if classification is a second control of the	hanging Registered Ages	nt: r with and accept the obligations of the position.
	Signatura of None	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 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> 14</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>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Said Abdul-Razaqq Wiggin	125 NE 32nd ST APT 1017
Add			Miami, FL 33137
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)		
			
			<u>-</u>
· · · · · · · · · · · · · · · · · · ·			
			
		·	
			<u>. </u>
			-
an amendment provides for an exch	ange, reclassification, o	r cancellation of issue	d shares,
orovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	in the amendment its	<u>elf:</u>
() q.p			
			· · ·
		<u>-</u>	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
October 30, 2017 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 requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following star must be separately provided for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes east 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 and shareh action was not required.	older
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	r
October 30, 2017	
Dated	
Signature (By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
Barbara Rhau	
(Typed or printed name of person signing)	
President	
(Title of person signing)	