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Office Use Only



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04/20/18--01018--000 **35.00

TO APR 20 AM II: 04

R. WHITE APR 23 2018

COVER LETTER

Division of Corporations King Auto Collection Inc NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Nicholas Firm/ Company port st lucie Floridg

City/ State and Zip Code E-mail address: (to be used for funde annual report notification) For further information concerning this matter, please call: at (<u>772</u>) <u>704–1506</u> Area Code & Daytime Telephone Number 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

TO: Amendment Section

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

FILED

Articles of Amendment to
Articles of Incorporation

18 APR 20 AM 11: 04

اد' ۸ . ا	مسأمل الأراح	of •	SEIRETAIBY STATE TALLAHASSEL FLORIDA	
King Huto	of Corporation as cu	rrently filed with	SEINE FAIRY STANIE TAIL AHANSTA FLORIDA h the Fjorida Dept. of State)	
	2277	Tentij inca miti	in the Court Dept. o. State	
Proceed	00 3277 (Document Num	ber of Corporation	on (if known)	
	•	1	rofit Corporation adopts the following amendn	nent(s)
A. If amending name, enter the new na	ame of the corporation	<u>)n:</u>		
Kina Auto Co	Meetica in	۸۲.	The ne	23.47
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc,'	" or "Co". A pr	oany," or "incorporated" or the abbreviation rofessional corporation name must contain the	n he
B. Enter new principal office address,		NA		
(Principal office address <u>MUST BE 4 S</u>	TREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
D. If amending the registered agent an new registered agent and/or the new			rida, enter the name of the	
Name of New Registered Agent	N/A			
	(Flor	ida street address)		
New Registered Office Address:	NA		, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ecept the obligations of the position.	
1.11				
<i>N{4</i>	Signature of I	New Registered A	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>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>	<u>Name</u>	Address
1) MA Change			
Add			-
Remove			
2) MA Change			
Add			
Remove			
3) NA Change			
Add			
Remove			
4) MA Change			
Add			
Remove			
5) <u>M/4</u> Change			
, Add			
Remove			
a da			
6) NA Change			
Add			
Remove			

. <u>If amending or adding additional Arti</u> (Attach <i>additional sheets, if necessary).</i>	
NA	
•	
All	
	
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ngingit is not contained in the unchannel twent
NA	
'	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 4-17-18	
(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 date w document's effective date on the Department of State's records.	ill 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(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4-(1-18 Signature	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Michalas Qualing	
(Typed or printed name of person signing)	
• •	
president	
(Title of person signing)	