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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FLORIDA PR	EFERRED AUTO SALES INC.
DOCUMENT NUMBER: P18000014927	
The enclosed Articles of Amendment and fee at	e submitted for filing.
Please return all correspondence concerning this	s matter to the following:
MARC KLANG	
	Nanie of Contact Person
FLORIDA PREFERREI	AUTO SALES
	Fim/ Company
3478 COMMERCIAL W	/AY
	Address
SPRING HILL FL 34600	6
	City/ State and Zip Code
SALES@FLORIDAPREFFER	REDAUTO.COM
•	be used for future annual report notification)
For further information concerning this matter,	please call:
MARC KLANG	at (352 353-3223
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount n	ade payable to the Florida Department of State:
\$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is chelosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FLORIDA PREFERRED AUTO SALES INC.	•		
(Name of Corporation as curren	tly filed with the Florida Dept. of Sta	te)	
P18000014927			
(Document Number	of Corporation (it known)	·	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the	e following amend	ment(s) to
A. If amending name, enter the new name of the corporation:		The r)./?\i.'
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation na	or the abbreviat	ion
B. Enter new principal office address, if applicable:	3478 COMMERCIAL WAY		
(Principal office address MUST BE A STREET ADDRESS)	SPRING HILL, FL 34606	2019	_ _
		, OV	""
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3478 COMMERCIAL WAY	-4 P)	- !
	SPRING HILL, FL 34606		
		9	_
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address		<u>e</u>	
Name of New Registered Agent			
(Florida s	treet address)		
New Registered Office Address: , Florida			
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		position	
т петогу ассерт те арронитет ах гедімегей адет там затінаг	жин ина ассерь те оридановх ој те	ромион.	

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 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	JEFFREY ALAN LISSOY	12263 KATHERWOOD ST
X Add			SPRING HILL, FL 34608
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary),	icles, enter change(s) here: (Be specific)
	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
Two districts provided for all tack	endment if not contained in the amendment itself:
provisions for implementing the ame-	minicing it have contained in the amendment usen.
provisions for implementing the ame (if not applicable, indicate N/A)	Annual II not contained in the amendment users.
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(if not applicable, indicate N/A)	Annual III IIV Comunica III the Amendment tisen.

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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 we document's effective date on the Department of State's records.	vill 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 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 shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 101 20) 19	
Signature W one V	
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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Presilent	
(Title of person signing)	