P18000032135

(Requestor's Name)
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PICK-UP WAIT MAIL
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COVER LETTER

'O: Amendment Section Division of Corporations

√AME OF CORPORA	MASTER AUTOL	IGHTS INC				
DOCUMENT NUMBE	P18000032135 R:					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspo	ndence concerning this ma	tter to the following:				
R	DBERTO HERNANDEZ F	REGUEIRO				
M	Name of Contact Person MASTER AUTOLIGHTS INC					
90	Firm/ Company 9092 NW SOUTH RIVER DR STE 48					
M	EDLEY FL 33166	Address				
		City/ State and Zip Cod	le .			
premiera	autolights@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information c	oncerning this matter, pleas	se call:				
ROBERTO HERNAND	EZ REGUEIRO	305 at (336-6819)			
Name of C	Contact Person		ode & Daytime Telephone Number			
Enclosed is a check for th	e following amount made	payable to the Florida Dep	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

MA	ASTE	RA	$\Gamma\Gamma$	OF	1GH	ITS.	INC

P18000032135	of Corporation as curren	tly filed with the Florida Dept, of	State)		
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopt	s the followin	g amendi	ment(s) to
A. If amending name, enter the new na	ame of the corporation:			The n	au.
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation	ed" or the a 1 name must	_ bbreviati	ion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Fort Lauderdale FL 33312			-
				20	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1760 SW 36 TER	:1	40% 61	
(, <u></u>	Fort Lauderdale FL 33312		0	- · ; -
				PH 12: 0	- · . ·
D. If amending the registered agent an			<u>f the</u>	07	
new registered agent and/or the new Name of New Registered Agent	SAME ON FILE	<u>88:</u>			
	1760 SW 36 TER			-	
	(Florida s	treet address)	33312	-	
New Registered Office Address:		(City)	orida	Code)	-
New Registered Agent's Signature, if c I hereby accept the appointment as regist			the position.		
	M)			
	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 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
X 1) Change	P	ROBERTO HERNANDEZ REGUEL	1760 SW 36 TER
Add			Fort Lauderdale FL 33312
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	 -	<u></u>	
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
NONE.	
	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
NONE	
- <u> </u>	

he date of each amendment(s) adoption:	, it other than the
ate this document was signed. 10/15/2019	
ffective date if applicable:	
ffective date <u>if applicable</u> : (no more than 90 days after amendmen	ı file date)
ote: If the date inserted in this block does not meet the applicable statutory filing re- ocument's effective date on the Department of State's records.	quirements, this date will not be listed as the
doption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for by the shareholders was/were sufficient for approval.	or the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the continuous continuous separately.	
"The number of votes cast for the amendment(s) was/were sufficient for approva	ıl
by(voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder ac action was not required.	tion and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action action was not required. 10/15/2019	and shareholder
Dated	
Signature (/4/)	
(By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, trappointed fiduciary by that fiduciary)	
ROBERTO HERNANDEZ	
(Typed or printed name of person signing PRESIDENT)

the

10/15/2019

(Title of person signing)