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SECRETARY OF STATE

OCT 2 4 2018 S. YOUNG

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations						
NAME OF CORPORATION: 3 Starz Auto Sales INC DOCUMENT NUMBER: 1800042922						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Name of Contact Person 3 Starz Anto Sales Inc Firm/Company 3860 NE 40 H L Address Of all FL 34479 City/State and Zip Code 3 Starzanto Sales @gmail (om E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Delay Forci at (454) 273-4329 Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building						

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

3 Starz Auto	$\leq^{\circ}a$	les:	Inc.				
(Name of Corporation a	as currently f	filed with the	Florida Dept.	of State)			
P 180 000 42	2925	2					
(Document	t Number of C	Corporation (i	ľ known)	·			
Pursuant to the provisions of section 607.1006, Florida Statista Articles of Incorporation:	tatutes, this FL	orida Profit (Corporation ado	pts the follo	wing amen	idment	l(s) to
A. If amending name, enter the new name of the corpo	oration:						
					The		
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb. B. Enter new principal office address, if applicable:	"Inc," or "Co breviation "P	. A profes					
(Principal office address MUST BE A STREET ADDRE	<u>ESS</u>)						
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered new registered agent and/or the new registered off	office addres	s in Florida,	enter the name	of the	SECRITARY OF STATE	18 QCT 7 PH % 53	FIRED
Name of New Registered Agent							
	(Florida street	t address)					
New Registered Office Address:			,	Florida			
	(C	City)		((Zip Code)		
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I as		th and accept	the obligations	of the positi	'оп.		
Signatu	ire of New Reg	gistered Agen	t, 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	PT John	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Saily	<u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
1)Change	P	Patrick R	3860 NE 40 MPL
Add		Bradshaw	Ocala FL 321479
X_{Remove}		2	STE D
2)Change	\bigvee	Eon Pindar	3860 NE40 th PL
$\Delta \Lambda$ dd			Olala PL 34479
Remove 3) (Change	₽	Delroy Ford	3860 NE YOTH P
Add		/	Ocala 12 34479
Remove		,	STED
4) Change	AC.	ERnest Innis	3860 NE 40th PL
<u>↓ Add</u>		in the contract of the contrac	<u> Vlala FL 34479</u>
Remove			SIED
5)Change			
Add			
Remove			
6)Change			
Add			
Remove			

ach additional sheets, if necessary).	(Be specific)	
		
		
n amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
aricland tap into between that the book	endment if not contained in the amendment itself:	
(if not applicable indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

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 requirements, this date will document's effective date on the Department of State's records.	I 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 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" (voting group)	
(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	
Dated	
(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)	
TELROY FORD (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	