## P18 0000 80813

| (Re                     | questor's Name)     |        |
|-------------------------|---------------------|--------|
| (Ad                     | dress)              |        |
|                         |                     |        |
| (Ad                     | dress)              |        |
| (Cit                    | y/State/Zip/Phone # | )      |
| PICK-UP                 | ☐ WAIT              | MAIL   |
| (Bu                     | siness Entity Name) |        |
| (0)                     | cument Number)      |        |
| (00)                    | eament Number)      |        |
| Certified Copies        | _ Certificates of   | Status |
| Special Instructions to | Filing Officer:     |        |
|                         |                     |        |
|                         |                     |        |
|                         |                     |        |
|                         |                     |        |



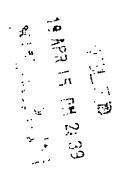


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S TALLENT APR 1 8 2019





## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO                          | RATION: Latinos Car Wash                    | Corp   |  |
|--|---|--|--|
| DOCUMENT NUM                           | BER: P18000080813                           |  |  |
| The enclosed Articles                  | of Amendment and fee are su                 | ibmitted for filing.   |  |
| Please return all corre                | spondence concerning this ma                | atter to the following:  |  |
|  | Gustavo Montes de Oca                       |  |  |
|  | <u> </u>                                    | Name of Contact Person   | n  |
|  | Tax & Credit Solutions Inc                  |  |  |
|  |   | Firm/ Company  |  |
|  | 12460 SW 8th ST Suite 103                   |  |  |
|  |   | Address  |  |
|  | Miami Fl 33184                              |  |  |
|  |   | City/ State and Zip Cod  | e  |
| camo                                   | igumo@yahoo.com                             |  |  |
|  |   | sed for future annual report                                       | notification)  |
| For further informatio                 | n concerning this matter, pleas             | se call:   |  |
| Gustavo Montes de C                    | )ca   | 305<br>at (  | 553-1550   |
| Name of Contact Person                 |   |  | de & Daytime Telephone Number  |
| Enclosed is a check for                | or the following amount made                | payable to the Florida Dept  | irtment 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                        |   |  | Address  |
| Amendment Section                      |   | Amendment Section  |  |
| Division of Corporations P.O. Box 6327 |   | Division of Corporations<br>Clifton Building                       |  |
| Tallahassee, FL 32314                  |   | 2661 Executive Center Circle                                       |  |

Tallahassee, Fl. 32301

## Articles of Amendment to Articles of Incorporation of

| Latinos Car Wash Corp  |                                       |  |               |                |                     |
|--|---------------------------------------|--|---------------|----------------|---------------------|
| ( <u>Name</u>  | of Corporation as current             | ly filed with the Florida Dept. of State)  |               |                |                     |
| P18000080813   |                                       |  |               |                |                     |
|  | (Document Number o                    | f Corporation (if known)   |               |                |                     |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | 1006, Florida Statutes, this          | Florida Profit Corporation adopts the follo  | wing ame      | ndmen          | t(s) to             |
| A. If amending name, enter the new na                                    | ame of the corporation:               |  |               |                |                     |
|  |                                       |  | The           | new            |                     |
|  | nation "Corp," "Inc," or              | on," "company," or "incorporated" or th<br>'Co". A professional corporation name m<br>"P.A." | ne abbrevi    | iation         |                     |
| B. Enter new principal office address,                                   |                                       |  | <del> =</del> | <b>_</b>       |                     |
| (Principal office address MUST BE A S                                    | TREET ADDRESS )                       |  | . f ∈4        | <b>3</b>       |                     |
|  |                                       |  | ." :          | <u> </u>       |                     |
|  |                                       |  | <del>.</del>  | <b>元</b>       |                     |
| C. Enter new mailing address, if appl                                    |                                       |  |               | 7              | 115<br>(T <b>CS</b> |
| (Mailing address <u>MAY BE A POST</u>                                    | OFFICE BOX)                           |  |               | <u> </u>       | 4.5                 |
|  |                                       |  | 15<br>        | <u>ين</u><br>6 |                     |
|  |                                       |  | •             | _              |                     |
| D. If amending the registered agent an                                   | d/or registered office add            | ress in Florida, enter the name of the   |               |                |                     |
| new registered agent and/or the new                                      |                                       |  |               |                |                     |
| Name of New Registered Agent   | Alfredo Trujillo                      |  |               |                |                     |
| rane of the headstreet tigen   | 21350 SW 102 CT                       |  |               |                |                     |
|  | (Florida str                          | reet address)  | <del></del>   |                |                     |
| 1000   | Quail Heights                         | 3319   | 19            |                |                     |
| New Registered Office Address:   | · · · · · · · · · · · · · · · · · · · | . Florida  | Zip Code)     |                |                     |
|  |                                       |  |               |                |                     |
|  |                                       |  |               |                |                     |
| New Registered Agent's Signature, if c                                   | hanging Registered Agent              | <u>:</u><br>with and accept the obligations of the position                                  |               |                |                     |
| i hereny accept the appointment as regist                                | erea ageni. Tam jamuiar v             | wun ana accept the obligations of the position   | )n.           |                |                     |
|  | . 1 10                                |  |               |                |                     |
|  | atrast                                |  |               |                |                     |
|  | Signature of New I                    | 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 De     | <u>)e</u>        |                        |
|-------------------------------|--------------|-------------|------------------|------------------------|
| X Remove                      | <u>v</u>     | Mike Jo     | ones .           |                        |
| X Add                         | <u>sv</u>    | Sally Si    | nith_            |                        |
| Type of Action<br>(Check One) | <u>Title</u> |             | <u>Name</u>      | <u>Addres</u> s        |
| 1) X Change                   | V            |             | Nettys M Doubles | 21350 SW 102 CT        |
| Add                           |              |             |                  | Quail Heights FL 33189 |
| Remove                        |              |             |                  |                        |
| 2) Change                     | <u>b</u>     |             | Alfredo Trujillo | 21350 SW 102 CT        |
| XAdd                          |              |             |                  | Quail Heights FL 33189 |
| Remove                        |              |             |                  | <del></del>            |
| 3 ) Change                    |              | <del></del> |                  | <del></del>            |
| Add                           |              |             |                  |                        |
| Remove                        |              |             |                  |                        |
| 4) Change                     |              | _           |                  |                        |
| Add                           |              |             |                  |                        |
| Remove                        |              |             |                  |                        |
| 5) Change                     |              |             |                  |                        |
| Add                           |              |             |                  |                        |
| Remove                        |              |             |                  |                        |
| <u> </u>                      |              |             |                  |                        |
| 6) Change                     |              | _           |                  |                        |
| Add                           |              |             |                  |                        |
| Remove                        |              |             |                  |                        |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)   |
|---|
| Please Change Registered Agent, to Alfredo Trujillo, same address.  |
| change President to Alfredo Trujillo, same address  |
| change Nettys M Doubles to Vice President, same address   |
|   |
|   |
|   |
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|   |
|   |
| 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) |
|   |
|   |
|   |
|   |
|   |
|   |
|   |

| The date of each amendment(s) a                                       | doption:  | 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 document's effective date on the D | block does not meet the applicable statutory filing requirements, thi epartment of State's records.   | s date will not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |                                  |
| ■ The amendment(s) was/were ad<br>by the shareholders was/were s      | opted by the shareholders. The number of votes cast for the amendmental option of the approval.   | ent(s)                           |
|   | proved by the shareholders through voting groups. The following star<br>reach voting group entitled to vote separately on the amendment(s):   | 'ement                           |
| "The number of votes cast   | for the amendment(s) was/were sufficient for approval   |                                  |
| by  | (voting group)  |                                  |
|   | (voung group)   |                                  |
| ☐ The amendment(s) was/were ad action was not required.               | opted by the board of directors without shareholder action and shareh   | older                            |
| ☐ The amendment(s) was/were ad action was not required.               | opted by the incorporators without shareholder action and shareholde  | r                                |
| 03/11/201<br>Dated  | 9   |                                  |
| Signature 🔨   | 1 th Daubly   |                                  |
| (By a c<br>selecte  | director, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other often fiduciary by that fiduciary) |                                  |
|   | Nettys M Doubles  |                                  |
|   | (Typed or printed name of person signing)   |                                  |
|   | President   |                                  |
|   | (Title of person signing)   |                                  |