P1900000 8020

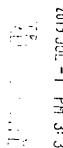
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

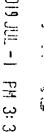
Office Use Only



100331379501

07/01/13--01012--014 ••45.75





R. WHITE JUL 11 2019

COVER LETTER

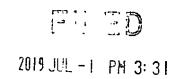
2

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CAPITAL AUTO	SOLUTIONS INC			
DOCUMENT NUMB					
	of Amendment and fee are su	abmitted for filing.			
Please return all corres	pondence concerning this ma	atter to the following:			
	CORNELIO OROZCO				
		Name of Contact Person	1		
	CAPITAL AUTO SOLUTIONS INC				
•		Firm/ Company			
	3126 STATE ROAD 574 SU	ЛТЕ В			
•	<u> </u>	Address			
	PLANT CITY FL 33563				
		City/ State and Zip Cod	e		
CAPI	TALAUTO77@GMAIL.CO	М			
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
CORNELIO OROZCO		at (813	4789179		
Name of Contact Person Area Code & Daytime Telephone					
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□S43.75 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



(Name of Corporation	on as currently filed with the Florida Dept: of State)
CAPITAL AUTO SOLUTIONS INC P19000008020	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co-	rporation:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	<u>:</u> PRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:
nereby accept the appointment as registered agent. I	am familiar with and accept the obligations of the position.
	ture 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>	Name	<u>Addres</u> s
1) Change	P	CORNELIO OROZCO	3126 STATE ROAD 574 SUIT B
X Add			PLANT CITY FL 33563
Remove			
2) Change			-
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets,	if necessary).	cles, enter chang (Be specific)	_			
				••		
			· ·			
-						
	·	·		<u></u> .		
			<u></u>			
	_					
					·	
	-					
· -			, <u>, , , , , , , , , , , , , , , , , , </u>		<u> </u>	
	<u> </u>			-		
						
					 	
	_ _	 ·				
.,						
f an amendment provid provisions for impleme	les for an exch	ange, reclassifica	ation, or cancella	tion of issued sh	iares,	
(if not applicable, in	ndicate N/A)	iginent ii not coi	<u>itameu in the air</u>	<u>ienament itsen:</u>		
			<u></u>	_		
·			<u></u>			
	<u>-</u>			· · · _ · · ·		

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
meetive date in applicable.	(no more than 90 days after amendment file date)	·
Note: If the date inserted in this document's effective date on the D	plock does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes east for the amendment(s) officient for approval.	
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
6/27/19		
DatedSignature	arnelia Oroza	
(By a d	irector, president or other officer — if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	CORNELIO OROZCO	
	(Typed or printed name of person signing)	
	REGISTER AGENT	
	(Title of person signing)	<u>-</u>