## P190000 25702

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

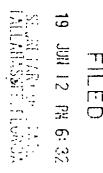
Office Use Only



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JUN 2 4 2019 S. YOUNG



## COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPOR  DOCUMENT NUMB	0/00	5 A.Ho Sol	es Inc			
Please return all corres	oondence concerning this ma	tter to the following:				
	Mooh	2 505550n (				
	SAS	Name of Contact Person	25 Inc			
-	301 NE 3rd St					
-	[tolland,	Address She Beoch	FL 33009			
	Freg Mosk E-mail address: (to be us	City/ State and Zip Cod	il com notification)			
For further information	concerning this matter, pleas	e call:				
Moshe ?	DissonVo	at 1 <u>646</u>	, 256-1439			
Name o	f Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made p	payable to the Florida Depa	irlment 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)			
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301			

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently f	iled with the Florida Dept. of State)			_
SAS Auto Soles For- PIO	0000 25707			
(Document Number of C	orporation (if known)			_
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the follo	wing amendm	ent(s) t	ω
A. If amending name, enter the new name of the corporation:				
		The ne	n.	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.,	". A professional corporation name m	e abbreviatio ust contain th	n C	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )		/		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		SECULIARY SECULIARY	19 JUN 12	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  Name of New Registered Agent	s in Florida, enter the name of the	TORBA	PH 6: 33	ר
tFlorida street	address)			
New Registered Office Address:	, Florida			
(Ci		Lip Coder		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with	's and accept the obligations of the positio	n.		

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: XChange	PT John	<u>Doc</u>		
X Remove	<u>V</u> <u>Mike</u>	Jones		
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	Scartax	Menachem M. Sos	sonko 1207 Lenor Le Hami Reach FL 3313	2 0
_>_ Add			temitecon FL 3313	5 <sup>u</sup>
Remove				
2) Change				
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51 Change				
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6) Change	<del></del>			
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	ding additional Aisheets, if necessary)				
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	provides for an ex-	change, reclassific	ration, or cancellar	tion of issued shares	2.
f an amendment	ancidenting the an	<u>benament it not co</u>	mtamed in the am	endment usen:	
<u>provisions for im</u>	able, indicate N/A)				
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the date of each amendment(s) adoption:	6/7/19	, if other than the
late this document was signed.  Effective date if applicable:	6   7   1 9 re than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reconstruction.	ne applicable statutory filing requirements,	
Adoption of Amendment(s) (CHECK ON	<u>E</u> )	
The amendment(s) was/were adopted by the shareholde by the shareholders was/were sufficient for approval.	ers. The number of votes east for the amen	idment(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group ent		
"The number of votes cast for the amendment(s)	was/were sufficient for approval	
by		
(voung group)	,	
☐ The amendment(s) was/were adopted by the board of d action was not required.	lirectors without shareholder action and sha	reholder
☐ The amendment(s) was/were adopted by the incorporat action was not required.	tors without shareholder action and shareho	older
Dated6/7/19		
selected, by an incorporator – appointed fiduciary by that fid	ther officer – if directors or officers have not if in the hands of preceiver, trustee, or oth duciary)  printed name of person signing)	
1 Osh	(Title of person signing)	
	the state of the s	