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COVER LETTER

COMMICS THE OPEN TO: Amendment Section Division of Corporations NAME OF CORPORATION: EJ CAR WASH CORP DOCUMENT NUMBER: P20000005909 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARCO REIS Name of Contact Person USA TAX CORPORATION Firm/ Company 591 E SAMPLE RD Address POMPANO BEACH FL 33064 City/ State and Zip Code USATAX@USATAXFL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARCO REIS at (954) 788-1818
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □S43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Articles of Incorporation of

EJ CAR WASH CORP			المِيْ		
(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	20 Mg.		
P20000005909			2		
	(Document Number	of Corporation (if known)	<u> </u>		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the follow	ving amendmൾ		
A. If amending name, enter the new n	ame of the corporation:				
			The new		
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbrevio A professional corporation name must con "	ation "Corp.,"		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3000 NW 5 TERRACE			
		SUITE 134			
		POMPANO BEACH FL 33309			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		3000 NW 5 TERRACE			
		SUITE 134			
		POMPANO BEACH FL 33309			
D. If amending the registered agent an new registered agent and/or the ne					
Name of New Registered Agent	ETIONE NUNES DORN	ELLES			
	3000 NW 5 TERRACE S	UITE 134			
	(Florida s	treet address)			
New Registered Office Address:	POMPANO BEACH	Florida 33309	ı		
	· · · · · · · · · · · · · · · · · · ·		ip Code)		
New Registered Agent's Signature, if call thereby accept the appointment as registered.	hanging Registered Agen tered agent. I am familiar	t: with and accept the obligations of the position	n.		
C	ione Nuns	Dowly Registered Agent, if changing			
	Signature of New I	Kegisiered Agent, if changing			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally St	nit h	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	Р		ETIONE NUNES DORNELLES	3000 NW 5 TERRACE
Add		_		SUITE 134
Remove				POMPANO BEACH FL 33309
2) X Change	VP		JOAO RODRIGUES DAS NEVES N	3000 NW 5 TERRACE
Add		-		SUITE 134
Remove 3) Change		_		POMPANO BEACH FL 33309
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

N # 84-4458330	al sheets, if necesso	ary). (Be specific)				
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<u>If an amendme</u>	it provides for an	exchange, reclassi	fication, or cancell	lation of issued sh	ares,	
	impiementing the icable, indicate N/	<u>: amenament it not</u> /a)	contained in the a	mendment itselt:		
<u>provisions for</u>	icume, mateure 1977	<i>~</i> 1)				
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05/20/2020	
The date of each amendment(s) adoption:	_, if other than
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.	not be listed as
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ 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)	
05/20/2020 Dated	
Signature (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)	
ETIONE NUNES DORNELLES	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)

the

the