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NAME:

BAFS CAPITAL CORPORATION/DBA NATIONAL CAR STORE

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BAFS CAPITAL	CORPORATION	
DOCUMENT NUMI	P20000012624		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	IGOR IOUNATANOV		
		Name of Contact Perso	<u></u> п
	BAFS CAPITAL CORPORA	ATION/DBA NATIONAL	CAR STORE
		Firm/ Company	····
	4464 TULANE DRIVE	. ,	
		Address	
	WEST PALM BEACH FL 3	3406	
		City/ State and Zip Cod	e
	IGOR@FLCARSTORE.COM	M	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	a concerning this matter, pleas		7000740
Name of Contact Person		at (561	7889700
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment 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 Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ting Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division The C 2415 P	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

BAFS CAPITAL CORPORATION.

(Name of Corporation as currently	Sled wish she Fig. 2d - Day of Santa
P20000013624	med with the Fiorida Dept. by State)
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this FI its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	•
D. If amending the registered agent and/or registered office address	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	We 5
Name of New Registered Agent	
	' ra '
(Florida street	address)
New Registered Office Address:	, Florida
	ity) (Zip Code)
	:
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar wit.	hand acceptable of the state of
тегсоу иссертые шроминентих гезилегей идент. Тат јатилаг wit	n and accept the outgations of the position.
Signature of New Regi	istered 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)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u> </u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change	PNR	SIMHAEV MIKHAEL	18041 BISCAYNE BLVD 1005-4S
x Add			AVENTURA FL 33160
Remove			
2) Change			Patrick Control of Section 2
Add			
Remove 3) Change			
Add			
Remove			
4) Change			×
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

E. If amending or adding a	dditional Artislas, antar o	hanga(s) hara:		
(Attach additional sheets,	if necessary). (Be specifi	c)		
		-		
				<u></u>
				
				_
				
				
				 -
F. If an amendment provide	es for an exchange, reclas	sification, or cancellati	ion of issued shares	
provisions for implement (if not applicable, ind	iting the amendment if no	ot contained in the ame	endment itself:	
()	,			
			<u>.</u>	
				
		·		
				

The date of each amendment(s) ado date this document was signed.	otion:, if other than the
Effective date if applicable:	
Entective date it applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, this date will not be listed as the runent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopte by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
☐ The amendment(s) was/were approx must be separately provided for each	ved by the shareholders through voting groups. The following statement th voting group entitled to vote separately on the amendment(s):
'The number of votes cast for	the amendment(s) was/were sufficient for approval
	(voting group)
	(voting group)
JUNE 9 2021 Dated	11/1
sciecica, b	or, president or other officer – if directors or officers have not been y an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)
IGG	DR IOUNATANOV
	(Typed or printed name of person signing)
PRI	ESIDENT
	(Title of person signing)