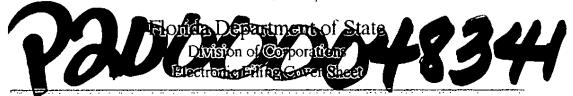
12/8/2020

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200004201283)))



H200004201283ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

**			r this business entity to be used for future Enter only one email address please.**
	Enter the	email address for	t this business entity to be used for future
		Fax Number	: (786)410-6035
۲.		Phone	: (305)758-9001
: 		Account Number	: I20010000121
ι. ⇔	From:	Account Name	: DEALER CONSULTING SERVICES, INC.
()			(===,==================================
			: (850)617-6380
	To:	Division of Co	rorations

COR AMND/RESTATE/CORRECT OR O/D RESIGN DEE & W AUTO SALE, INC.

Certificate of Status	0
Certified Copy	θ
Page Count	01
Estimated Charge	\$35.00

IS	N	0	٨	f	M	ľ	S	\cap
ĸ	N	U	Л	ľ	M	Н	S	O

DEC 2 2 2020

Electronic Filing Menu

Corporate Filing Menu

Help

DocuSign Envelope ID: 25D9DF4C-4C4E-4134-92CC-D06908D24CF8

Tallahassee, FL 32314

,		COVER LETTER		
TO: Amendment Sec Division of Corp			;	
NAME OF CORPO	PRATION: DEE & W AUTO	SALE, INC.		
DOCUMENT NUM	P20000048341			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	BIBI HURTADO			
		Name of Contact Persor	1	
	DEALER CONSULTING SE	RVICES, INC.		
		Firm/ Company		
	7537 NW 7 AVENUE	22mm Company		
		Address		- د۱
	MIAMI, FLORIDA 33150			\circ
		City/ State and Zip Code		0.0
	CORPORATIONS@DCS-N	ETWORK.COM		.) .)
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	∞ call:		00 8
BIBI HURTADO		at (305	758-9001	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	-
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
An Di	ailing Address nendment Section vision of Corporations D. Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

DocuSign Envelope ID: 25D9DF4C-4C4E-4134-92CC-D06908D24CF8

Articles of Amendment to Articles of Incorporation of

DEE & W AUTO SALE. INC.			· · · · · · · · · · · · · · · · · · ·	
	n as currently filed with	the Florida Dept. of State)		
P20000048341				
(Docume	ent Number of Corporation	on (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Pro	fit Corporation adopts the following	ig amendmen	t(s) to
A. If amending name, enter the new name of the cor	rporation:			
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp." "Inc," "chartered." "professional association," or the abbrev	or "Co". A profession			
B. Enter new principal office address, if applicable:			ڌخ	- 6
(Principal office address MUST BE A STREET ADDI				' -
		······································		.:5
	. 		<i>.</i>	<u></u>
C. Enter new mailing address, if applicable:			<u>۔</u> چ	1519
(Mailing address MAY BE A POST OFFICE BOX	<u></u>		جَا	တ္ က
			2	ECHON
				. 2
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		ida, enter the name of the		
Name of New Registered Agent	<u>.,</u>	······································	_	
	(Florida street address)		_	
New Registered Office Address:		, Florida		
	(City)	(Zip	Code)	
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		cept the obligations of the position.		
Signal	ture of New Registered As	zent if changing	-	
Ţ.	vy v vog mivrou rig	2 A		
Check if applicable				

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

Example:

DocuSign Envelope ID: 25D9DF4C-4C4E-4134-92CC-D06908D24CF8

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:

From: +17864106035 (DCS)

(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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Salty Smith, SV as an Add

X Change	PI	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	WHITNEY C. JOACINE	11 SHAFFER ST #2 LOWELL
XX Add			LOWELL, MA 01854-3113
Remove			
2) Change	P	MICHELET JOACINE	2550 NW 159TH STREET
Add			MIAMI GARDENS, FL 33055
XX Remove 3) Change	VP	LICOT JOACINE	2550 NW 159TH STREET
Add			MIAMI GARDENS, FL 33055
XX Remove			
4) Change			
Add			·····
Remove			
5) Change	 		
Add			
Remove			
6) Change		_	
Add			
Remove			

If amendi	ng or adding additional Articles, enter change(s) here:
Attach ad	ditional sheets, if necessary). (Be specific)
·=·	
• • • • • • • • • • • • • • • • • • • •	
······································	
lf an ame	ndment provides for an exchange, reclassification, or cancellation of issued shares,
provision	is for implementing the amendment if not contained in the amendment itself: ot applicable, indicate N/A)
(1) //(wappileasie, maiedae may

① Dec 21, 2020 11:46 (UTC-05) From: +17864106035 (DCS)

To: +18506176380 🗓 5 of 6

The date of each amendment(s) a	loption:	, if other than t
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 be document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	us date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	pted by the shareholders. The number of votes cast for the amenda flicient for approval.	nent(s)
	roved by the shareholders through voting groups. The following st 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)	
12-07-2020		
Dated	custigned by.	
Signature U	ntney zooline	
(By a d	rector, president or other officer – if directors or officers have not i, by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary)	
	WHITNEY C. JOACINE	
	(Typed or printed name of person signing)	

(Title of person signing)

① Dec 21, 2020 11:46 (UTC-05) From: +17864106035 (DCS)

To: +18506176380 👰 6 of 6