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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	A 3205 AUTO SALES, INC					
DOCUMENT NUMBER: P20	000080659					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
JORGE CASTRO						
Name of Contact Person FI MIAD TAV						
Firm/ Company						
12 W. Hallandale Gon Bluc)						
	Address					
<u> HANAMAR</u>	tle 500, th 33009					
	City/ State and Zip Code					
79.025	no@att.net					
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
702tic Casteo 31, 305, 510.7200						
Name of Contact Person Area Code & Daytime Telephone Num						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy (Additional copy is enclosed) □S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section	Street Address					
Amendment Section Amendment Section Division of Corporations Division of Corporations						
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suit						

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SOSA BROS AUTO SALES INC					
(Name of Corporation	as currently file	d with the Florid	la Dept, of State)	
P20000080659					
(Docume	nt Number of Cor	poration (if know	n)		
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	Statutes, this <i>Flori</i>	ida Profit Corpora	ution adopts the f	following amendme	ent(s)
A. If amending name, enter the new name of the corp	poration:				
SOSA BRÓS AUTO SALES CORP				The new	.1
name must be distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc," or chartered," "professional association," or the abbrevi	or "Co". A pro			previation "Corp.,"	,,
B. Enter new principal office address, if applicable:				23.5	
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>EESS</u>)			20 NO.	
		·		<u> </u>	•
	_			9	
C. Enter new mailing address, if applicable:				PH	
(Mailing address MAY BE A POST OFFICE BOX) _			 ယ	
	_				
D. If amending the registered agent and/or registered		in Florida, enter	the name of the		
new registered agent and/or the new registered of	fice address:				
Name of New Registered Agent					
	(Florida street a	(dress)			
New Registered Office Address:			, Florida_		
	(City)		(Zip Code)	
N. D. C. L. D. S. C. L. L. D. C.					
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I d		and accept the obl	ivations of the pe	sition.	
	-	•			
Signau	ure of New Regist	ered Agent, if cha	nging		

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.

Example: X Change	<u>PT</u>	John Doe	e	
X Remove	<u>V</u>	Mike Jor	les	
<u>X</u> Add	<u>sv</u>	Sally Sm		
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add		_		
Remove 3.) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	s, if necessary).	(Be specific)			
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f an amendment provi provisions for implem (if not applicable, i	<u>enting the amen</u>	ange, reclassifica adment if not cor	tion, or cancellat itained in the am	ion of issued sha endment itself:	res,
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	11/09/2020	
The date of each amendment date this document was signed		, if other than the
Effective date if applicable:	11/09/2020	
	(no more than 90 days after ameadment file	date)
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requir he Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/wei by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/wei must be separately provide	re approved by the shareholders through voting groups. The for d for each voting group entitled to vote separately on the amer	llowing statement idment(s):
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
11/09/	2020	
Dated		
Signature	Butto	
(B	y a director, president or other officer – if directors or officers lected, by an incorporator – if in the hands of a receiver, truste pointed fiduciary by that fiduciary)	have not been c, or other court
	BRYAN J SOSA HERNANDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	