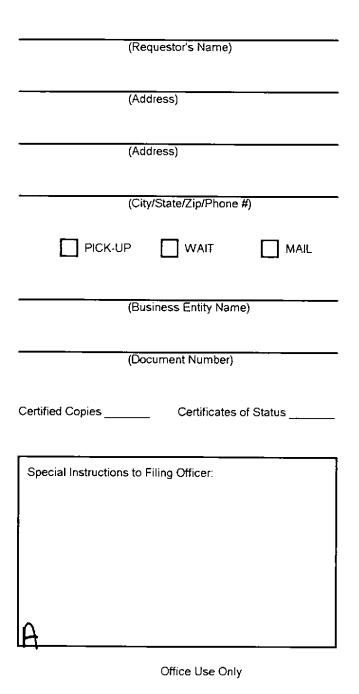
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: X- CARS V	indesale INC
DOCUMENT NUMBER: P220004	
The enclosed Articles of Amendment and fee are submitte	d for filing.
Please return all correspondence concerning this matter to	-
ERIKA C	antero
Na	TCIGI SERVICES LLC Firm/ Company
	X 2612 Address
Woods	Address HOCK GA 30188 V State and Zip Code
Elika, C. Car E-mail address: (to be used for	HERO Q GMail, COM future annual report notification)
For further information concerning this matter, please call:	
Erika Cantero	a. (678), 643-0714
Name of Contact Person	Arca Code & Daytime Telephone Number
Inclosed is a check for the following amount made payabl	e to the Florida Department of State:
Certificate of Status Co	#3.75 Filing Fee & S52.50 Filing Fee entified Copy Certificate of Status Iditional copy is Certified Copy closed) (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

X-Cars Wholesale INC
(Name of Corporation as currently filed with the Florida Dept. of State)
P22000061729
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS) Tacksonville, FL 32246
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 in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent 10695 Beach Blvd
New Registered Office Address: Jackson VIV
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

Check if applicable

 \Box 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> <u>Jo</u>	ohn Doe			
X Remove	<u>V</u> <u>N</u>	like Jones			
X Add	<u>SV</u> <u>S</u>	ally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Add	?	Mayara Ci	olfi Dineira	10695 Beach Blva Jacksonville, Ki	<u>1</u> 32246
Remove 2) X Change Add	VP			yama 10695 Beach Jackson ville, Fl	
Remove 3) Change Add					-
Remove 4) Change Add					-
Remove					-
Add Remove 6) Change					-
Add Remove					•

Attach additional sheets, if necessary).	(Be specific)				
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f an amendment provides for an excl provisions for implementing the ame	<u>range, reclassifica</u>	tion, or cancellat	tion of issued s	<u>hares,</u>	
(if not applicable, indicate N/A)	adment it not con	tamed in the am	endment itsen	<u>:</u>	
			·		
					

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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: August 29, 2022 (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 wild document's effective date on the Department of State's records.	Il not be listed as the
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.	d shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval	
by	
Signature (By a firector, 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)	
ERIKA CANHELO (Typed or printed name of person signing)	
Registered Agent (Title of person signing)	