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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: AUTO ENHANCE	EMENT PROS INC				
DOCUMENT NUM	P23000020018					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	ater to the following:				
	ALEJANDRO PICHARDO					
		Name of Contact Person	n	•		
	ACCOUNTING CENTER O	F ORLANDO LLC				
		Firm/ Company				
	1706 E SEMORAN BLVD S	· -				
		Address				
	APOPKA, FL 32703	(iddites)				
		City/ State and Zip Cod	r			
			•			
	APICHARDO@ACCOUNT					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:		s	20	
ALEJANDRO PICHA	ARDO	at (407	574 - 7340	TOR:	23 HA	ŗ.
Name of Contact Person Area Code & Daytime			de & Daytime Telephone Numbe	2.7	~< (3)	
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:	大説の	11 PH	, m 1 1 1 1 1 1
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	SECRETALY OF STATE	112: 54	*11.
Ame Div	iling Address endment Section ision of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations course of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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	ntly filed with the Florida Dept. of State)
P23000029918	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation,"	The new
"Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2721 FORSYTH RD
-	STE 115
	WINTER PARK, FL 32792
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	W11.5
Name of New Registered Agent	ZIIZI HAY 3
	A E S
(Elavida	street address)
(Fiorial 3	street daaress)
New Registered Office Address:	, Florida
	(City) (Zip Code) 53
	근걸 '[
Naw Degictored Agent's Signature of Alemaine Designated Asset	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.
	, , ,
Signature of New	Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

Remove

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		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	P	Antunes Mourao J, Leonidas SA	4450 URBANA DR APT 312	
Add			ORLANDO, FL 32837	
X Remove				
2) Change	P	MANUEL ORTIZ	2721 FORSYTH RD	
X Add			STE 115	
Remove 3) Change			WINTER PARK, FL 32837	
Add				
Remove				
4) Change			2023	
Add			SECRETARY 31	;
Remove				parties .
5) Change				į [;
Add			12: 5 FI	لتريا
Remove				
6) Change				
Add				

amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)	
If an amendment provides for an exchange, reclassification, or cancell	leading of the Late
provisions for implementing the amendment if not contained in the a	mendment itself:
(if not applicable, indicate N/A)	
	SEC/35 TALL
	Y 31 BH 12: 54 LARY OF STATE AHASSICE, FL
	RH 12: 54

The date of each amendment(s) ad	option:	, if other than the
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 bl document's effective date on the Dep	ock does not meet the applicable statutory filing records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors witho	ut shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were sul	oted by the shareholders. The number of votes east for ficient for approval.	or the amendment(s)
	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the a	
"The number of votes east f	or the amendment(s) was/were sufficient for approva	ıl
by	(voting group)	
	(voting group)	
selected appointe	ector, president or other officer - if directors or office by an incorporator - if in the hands of a receiver, trud fiduciary by that fiduciary) MANUEL DE IZ (Typed or printed name of person signing)	istee, or other court
	(Typed or printed name of person signing)	·
	Pes	
	(Title of person signing)	

2023 MAY 31 PH 12: 54 SECRETÁRY OF STATE TALLAHASSEE, FL