P2300063694

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer: Registered Agent Signature			

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FILED 1023 OCT 27 AMII: 23 SECHERING OF STAIR



COVER LETTER

TO: Amendment Sec Division of Corp		'	· 4	
NAME OF CORPO	RATION: PLUSCARS INC			
DOCUMENT NUM	BER: P23000063694			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	DANIELE P DI PRIMA			
		Name of Contact Persor	1	
	PLUSCARS INC			
		Firm/ Company		
	8679 NW 66TH ST			
		Address		
	MIAMI, FL 33166			
		City/ State and Zip Code	2	
	dpdiprima@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
DANIELE P DI PRIMA		at (305	7907901	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (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

FILED

(<u>Name o</u> P23000063694	f Corporation as current	ly filed with the Florida Dept 201 State 11: 23
P23000063694		
		SEC 111 LOF STATE
	(Document Number o	SEC OF STATE f Corporation (if known) SEE, FL
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:	
N/A		The new
	orp," "Inc," or "Co"	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, i	f annlicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applie (Mailing address <u>MAY BE A POST O</u>		N/A
D. If amending the registered agent and new registered agent and/or the new	_	
Name of New Registered Agent	DANIELE P DI PRIMA	
	8679 NW 66TH ST	
	(Florida str	rect address)
	MIAMI	33166
New Registered Office Address:		(City) , Florida (Zip Code)
		V-12
New Registered Agent's Signature, if ch	anging Registered Agent	<u>:</u>
I hereby accept the appointment as registe	ered agent. I am familiar	with and accept the obligations of the position.
		<i></i>
	7//	
	Simple Man D	legistered 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)

Example:

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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	DI PRIMA, DANIELE P	8679 NW 66TH ST
Add	 -		MIAMI, FL 33166
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	•
 If an amendment provides for an exch provisions for implementing the ame 	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
	

The date of each amendment	(s) adoption:	, if other than the
date this document was signed.		, it office than the
_	09/11/2023	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	c adopted by the shareholders. The number of votes east for the amendate sufficient for approval.	nent(s)
	e approved by the shareholders through voting groups. The following st d for 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	
N/A		
by	(voting group)	
09/11/	2023	
Dated		
Signature	#//	
sei	a director, president or other officer – if directors or officers have not be a director, by an incorporator – if in the hands of a receiver, trustee, or other pointed fiduciary by that fiduciary)	
	DANIELE P DI PRIMA	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	PRESIDENT	
	(Title of person signing)	



October 12, 2023

DANIELE P DI PRIMA 8679 NW 66TH ST MIAMI, FL 33166

SUBJECT: PLUSCARS INC Ref. Number: P23000063694

We have received your document for PLUSCARS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

UCT Z / 2023

Letter Number: 623A00023684