## P97000022220

| : ATTO<br>800 FIRS      | IEN F. BAKER DRINEY AT LAW T STREET SOUTH EN, FLORIDA 33880-3 |           |
|-------------------------|---|-----------|
| (Ac                     | idress)   |           |
| (Cit                    | ty/State/Zip/Phone  | #)        |
| PICK-UP                 | ☐ WAIT  | MAIL MAIL |
| (Ви                     | ısiness Entity Nam  | e)        |
| <b>1</b> D-             | - Number  |           |
| (DC                     | ocument Number)   |           |
| Certified Copies        | Certificates  | of Status |
| Special Instructions to | Filing Officer:   |           |
|                         |   |           |
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Office Use Only



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10712/12-01033--010 \*\*35.00



Amend

OCT 1 5 2012

T. LEWIS

## **Articles of Amendment** to Articles of Incorporation

FILED 2012 OCT 12, AMII: 22 SECKE TARY OF STATE TALLAHASSEE, FLORIDA

## SPACE COAST AUTO LIQUIDATORS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

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ent(s) to

| (Documer   | nt Number of Corporation (if k                                      | known)  |                |
|--|---|---|----------------|
| Pursuant to the provisions of section 607. its Articles of Incorporation:  | 1006, Florida Statutes, this Fl                                     | Ilorida Profit Corporation adopts the following amen  | ndme           |
| A. If amending name, enter the new na  | ime of the corporation:   |   |                |
|  |   |   | печ            |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | ation "Corp," "Inc," or "Co   | " "company," or "incorporated" or the abbrevi<br>co". A professional corporation name must contail<br>A." | ation<br>n the |
| B. Enter new principal office address, (Principal office address MUST BE A S   | <u>if applicable:</u><br>TREET_ADDRESS_)                            |   |                |
|  |   |   |                |
| C. Enter new mailing address, if appli<br>(Mailing address MAY BE A POST   | icable:<br>OFFICE BOX)  |   |                |
|  |   |   |                |
| D. If amending the registered agent an   | id/or registered office addres                                      | ess in Florida, enter the name of the   |                |
| new registered agent and/or the nev  |   | go in a following circle, the state of the  |                |
| Name of New Registered Agent   | Michael Wiley   |   |                |
|  | 6 Oakridge Road   |   |                |
|  | (Florida stree  | et address)   |                |
| New Registered Office Address:   | Davenport   | , Florida 33837   |                |
| rew registered Office rude ess.  | (City)  | (Zip Code)  |                |
|  |   |   |                |
| New Registered Agent's Signature, if c   | hanging Registered Agent:<br>tered agent. I <b>o</b> m familiar wit | ith and accept the obligations of the position.   |                |
| Mic  | MIT I/A   | 1 0 m y 1 m   |                |
| Si   | gnature of New Registered Ag  | gent, if changing   |                |

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> J        | ohn Doe       |                     |
|-------------------------------|--------------------|---------------|---------------------|
| X Remove                      | <u>v</u> <u>n</u>  | Mike Jones    |                     |
| X Add                         | <u>sv</u> <u>s</u> | Sally Smith   |                     |
| Type of Action<br>(Check One) | <u>Title</u>       | <u>Name</u>   | <u>Addres</u> s     |
| 1) Change                     | PD                 | Tammy Wiley   | 6 Oakridge Road     |
| Add                           |                    |               | Davenport, FL 33837 |
| X Remove                      |                    |               |                     |
| 2) Change                     | PD                 | Michael Wiley | 6 Oakridge Road     |
| X Add                         |                    |               | Davenport, FL 33837 |
| Remove                        |                    |               |                     |
| 3) Change                     |                    |               |                     |
| Add                           |                    |               |                     |
| Remove                        |                    |               |                     |
| 4) Change                     |                    |               |                     |
| Add                           |                    |               |                     |
| Remove                        |                    |               |                     |
| 5) Change                     |                    |               |                     |
| Add                           |                    |               |                     |
| Remove                        |                    |               |                     |
| 6) Change                     | _                  |               |                     |
| Add                           | <del></del> _      |               |                     |
| Remove                        |                    |               |                     |

|                | adding additional A nal sheets, if necessary, | ). (Be specific)  |                            |                          |                |
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|                |   |                   |                            |                          |                |
|                | ent provides for an ex                        | change, reclassif | <u>fication, or cancel</u> | lation of issued sl      | i <u>ares,</u> |
| f an amendme   | r implementing the ar                         | nendment if not   | <u>contained in the a</u>  | <u>imendment itself:</u> |                |
| provisions for |   |                   |                            |                          |                |
| provisions for | olicable, indicate N/A)                       | !                 |                            |                          |                |
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| provisions for | olicable, indicate N/A)                       |                   |                            |                          |                |

| The date of each amendment(s) adop                                    | tion: October 4, 2012  |
|---|--|
| Effective date if applicable: Octo                                    | ber 4, 2012  |
| · ·   | (no more than 90 days after amendment file date)   |
|   |  |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |
| The amendment(s) was/were adopte by the shareholders was/were suffice | d by the shareholders. The number of votes cast for the amendment(s) ient for approval.  |
|   | ed by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s): |
|   | the amendment(s) was/were sufficient for approval  |
| by  | (voting group)   |
| The amendment(s) was/were adopte action was not required.             | d by the board of directors without shareholder action and shareholder   |
| The amendment(s) was/were adopte action was not required.             | d by the incorporators without shareholder action and shareholder  |
| Dated   | Jammy Willey   |
| Signature(By a direc  | Jaminy Willy tor, president of other officer - it directors or officers have not been  |
| •   | y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)                                |
| <u>T.</u>   | ammy Wiley   |
|   | (Typed or printed name of person signing)  |
| <u>P</u>  | resident   |
|   | (Title of person signing)  |