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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corpo	rations				
NAME OF CORPOR	ATION: VERY BEST FOR	EIGN CARS, INC		18 OCC 26 14 8: 28	
DOCUMENT NUMB					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this ma	tter to the following:		Ø.	
	JODI RONEN			To the second se	
-	Name of Contact Person				
	IG CONSULTING SERVIC	ES, LLC			
-		Firm/ Company			
:	5481 WILES RD STE 502				
_		Address			
•	COCONUT CREEK, FL 330	173			
-		City/ State and Zip Code	2		
JODI	GACCU-TAX.TAX				
	-	sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
JODI RONEN		at (_) 220-8270		
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

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of Corporation as currently filed with the Florida Dept. of State)	10 C 25
	رځ:
(Document Number of Corporation (if known)	740
1006, Florida Statutes, this Florida Profit Corporation adopts the following	lowing amendफ्री
ime of the corporation:	
if applicable; TREET ADDRESS)	,
cable: OFFICE BOX) d/or registered office address in Florida, enter the name of the	
	;
SILVU ADRIAN ARIESAN	 :
16 NW 18 AVE BLDG B BAY BIA	:
(Florida street address)	
DELRAY BEACH , Florida 334	145
(City)	(Zip Code) ·
hanging Registered Agent: ered agont. I am familiar with and accept the obligations of the posi	tion.
	(Document Number of Corporation (if known) 1006, Florida Statutes, this Florida Profit Corporation adopts the following of the corporation: the word "corporation," "company," or "incorporated" or the abbreviation "P.A." if applicable: TREET ADDRESS) cable: OFFICE BOX) d/or registered office address in Florida, enter the name of the v registered office address: SILVU ADRIAN ARIESAN 16 NW 18 AVE BLDG B BAY B1A (Florida street address) DELRAY BEACH (City)

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	PT	John Doe			
X Remove	<u>V</u>	Mike Jones			
_X Add	_ <u>SV</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	P	ADINA ARIESAN	16 NW 18 AVE BLDG B BAY BL		
Add			DELRAY BEACH, FL 33445		
Remove		Silviu adrian ariesan			
2) Change	P	SILV ja adrian ariesan	16 NW 18 AVE BLDG B BAY B1.		
_ 火 _ Add			DELRAY BEACH, FL 33445		
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					
		Page 2 of 4			
		onal Articles, enter change(s) here: :essary). (Be specific)			

		
		<u>. </u>
provisions for implementing the amend	nge, reclassification, or cancellation of issued shares, Iment if not contained in the amendment itself:	
If an amendment provides for an exchange provisions for implementing the amend (if not applicable, indicate N/A)	nge, reclassification, or cancellation of issued shares, Iment if not contained in the amendment itself:	
provisions for implementing the amend	nge, reclassification, or cancellation of issued shares, Iment if not contained in the amendment itself:	
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provisions for implementing the amend	Iment if not contained in the amendment itself:	
provisions for implementing the amend (if not applicable, indicate N/A)	Page 3 of 4	
provisions for implementing the amend (if not applicable, indicate N/A) he date of each amendment(s) adoption:	Iment if not contained in the amendment itself:	
provisions for implementing the amend (if not applicable, indicate N/A)	Page 3 of 4	

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)		·
The amendment(s) was/were add by the shareholders was/were su		e number of votes cast for the amendment(s)	•
		ough voting groups. The following statement vote separately on the amendment(s):	:
The number of votes east	for the amendment(s) was/we	re sufficient for approval	•
by	(voting group)		:
	(voting group)		•
The amendment(s) was/were add action was not required.	opted by the board of directors	without shareholder action and shareholder	1
action was not required.	1 A	out shareholder action and shareholder	
Dated 12	120 19		:
Signature /	y Mer		<u> </u>
selecte		rer – if directors or officers have not been e hands of a receiver, trustee, or other court	:
.,		Aries or	
	(Typed or printed i	name of person signing)	
	Dresident		
	(Title of person signing)		