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BARRON REDDING PA

PAGE 02/05

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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : BARRON & REDDING, P.A.

Account Number : 073617000710

Phone : (850)785-7454

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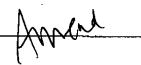
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COR AMND/RESTATE/CORRECT OR O/D RESIGN A & B AUTO SALES OF JACKSONVILLE, INC.

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March 2, 2017

FLORIDA DEPARTMENT OF STATE

A & B AUTO SALES OF JACKSONVILLE, Division of Corporations 1383 JACKSON AVE CHIPLEY, FL 32428

SUBJECT: A & B AUTO SALES OF JACKSONVILLE, INC. REF; P99000012227

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

THE DOCUMENT MUST BE SIGNED AND DATED ON PAGE 4 OF 4.

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.

Susan Tallent Regulatory Specialist II FAX Aud. #: H17000058358 Letter Number: 417A00003985

Articles of Amendment to Articles of Incorporation of

A & B AUTO SALES OF JACKSONVI	LLE, INC.			
(Name o	of Corporation as curren	itly filed with the Florida Dept	t. of State)	
F77000012227	(Document Number	of Corporation (if known)		****
Pursuant to the provisions of section 607. its Articles of Incorporation:			lopts the following an	nendment(s) to
A. If amending name, enter the new no	me of the corporation:			
				e new
name must he distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional ussocia	ation "Curp," "Inc," or	"Co". A professional corpora	rated" or the abbre tion name must cont	viation ain the
B. Enter new principal office address,		1946 Hwy 231	/_ _	
(Principal office address MUST BE A S	TREET ADDRESS)	Alford, FL 32420	jerni jerni Prasi	
				三 素 工
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		2135 Foxford St.	9/1 (7) (7)	-2 E
• • • • • • • • • • • • • • • • • • •		Cantomnent, FL 32533	<u> </u>	<u> </u>
			Ē	11 5
D. If amending the registered agent an new registered agent and/or the nev	d/or registered office ad v registered office addre	dress in Florida, enter the nam	e of the	***************************************
Name of New Registered Agent	BARRON & REDDING			
CONTROL POR DESIGNATION	220 McKENZIE AVE.	<u></u>	· · ·	
	(Florida s	reet address)		
New Registered Office Address:	PANAMA CITY		Florida 32401	
	(City)		(Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nnging Registered Agen tred agent. I am familian	i <u>t:</u> with and accept the obligations	of the position.	
		Pagint was discussed in the same		

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:

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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 euch 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>	<u>Iohn Doe</u>	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>5V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PST	ANN L. BELL	DECEASED
Add X Remove			
2) Change	P	STEPHANIE STANTON	2135 Foxford St.
XAdd			Cantonment, FL 32533
Remove 3) Change X Add	VP	DWIGHT BELL	67 Kent Mill Pond Rd
Remove			
4)Change	VP	DWAYNE BELL	2196 Archie Sapp Road
X Add Remove			Alford, FL 32420
5) Change			
Add			
δ) Change	(1011-1011-1011-1011		
Add			
Remove			

(Attach addition	adding additional Articles at sheets, if necessary).	(Be specific)	over mere.			
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	-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	** *				
provisions for	nt provides for an excl implementing the ame licable, indicate N/A)	iange, reclassific ndment if not co	ation, or cancellat ntained in the am	ion of issued sha endment itself:	ares.	***
					· · · · · · · · · · · · · · · · · · ·	

·	A. Ha					
	-		- ,			-
						

	DECEMBER 15, 2016	
The date of each amendment(s) a date this document was signed.	doption:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vate separately on the amendment(s):	ı
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
I The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad- action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 3-(- 2017	
	ephanie Stanton	
selecto	lirector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other count ted fiduciary by that fiduciary)	
	STEPHANIE STANTON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	