

P99000035128

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LAZARUS CORPORATE FILING SERVICE, INC.

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(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

800003010038--4

-10/08/99-01069-013

*****35.00 *****35.00

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ECONOCAR RENTALS OF MIAMI, INC.
(Corporation Name) (Document #)

2. Amend
(Corporation Name) (Document #)

3.
(Corporation Name) (Document #)

4.
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED

99 OCT -8 AM 11:39

FILED

99 OCT 12 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400789,00573,00672

Examiner's Initials

ADP



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 8, 1999

Lazarus Corporate Filing Service, Inc.
3320 S.W. 87th Avenue
Miami, FL

SUBJECT: ECONOCAR RENTALS OF MIAMI, INC.
Ref. Number: P99000035128

We have received your document for ECONOCAR RENTALS OF MIAMI, 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 incorporator(s) cannot be amended or changed. Please correct your document accordingly.

If you have any questions concerning the filing of your document, please call (850) 487-6907.

Annette Ramsey
Corporate Specialist

Letter Number: 799A00048949

RECEIVED
99 OCT 12 AM 11:14
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF**

ECONOCAR RENTALS OF MIAMI, INC.
(Present name)

FILED
99 OCT 12 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts
The following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicated articles number(s) being amended, added
Or deleted)

ARTICLE VI: DIRECTOR(S)

(ADD) SONIA CASTELLANOS as PRESIDENT
2400 NW 39TH AVENUE
MIAMI, FL 33142

(ADD) MARTIN BRAND as SECRETARY/TREASURER
2400 NW 39TH AVENUE
MIAMI, FL 33142

(DELETE) NATASHA TOLEDO
5445 COLLINS AVENUE APT 406
MIAMI, FL 33168

SECOND: If an amendment provides for an exchange, reclassification or cancellation of
Issued shares, provisions for implementing the amendment if not contained in the
Amendment itself, is as follows:

SONIA CASTELLANOS 100% SHARES

THIRD: The date of each amendment's adoption: 09/30/99

FOURTH: Adoption of Amendment(s) (check one)

_____ The amendment(s) was/were adopted by the incorporation without shareholder
Action and shareholder action was not required.

_____ The amendment(s) was /were adopted by the board of directors without
Shareholder action and shareholder action was not required.

X_____ The amendment(s) was/were approved by the shareholders. The number of votes
Cast for the amendment(s) was/were sufficient for approval.

_____ The amendment (s) was/were approved by the shareholders through voting groups.

[The following statement must be separately provided for each group entitled to vote separately on the amendment (s).]

The number of votes cast for the amendment (s) was/were sufficient for
Approval by _____
(Voting group)

Signed this 30th day of SEPTEMBER, 1999

I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT
AND AGREE TO ACT IN THIS CAPACITY.

Signature *Sonia Castellanos*
(By the chairman of the Board of Directors,
President or other officer if adopted by the shareholder's)

OR

(By a director if adopted by the directors)

OR

(By an incorporation if adopted by the incorporations)

SONIA CASTELLANOS
Typed or printed name

PRESIDENT/DIRECTOR/INCORPORATOR
Title