1/2000/389/0

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
-	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
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	NOV 14 2012
	EXAMINER



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COVER LETTER

Division of Corpo		
SUBJECT:	CORPUSA CARS, LLC	
•	Name of Limited Liability Company	
	•	
The enclosed Articles of A	mendment and fee(s) are submitted for filing.	
Please return all correspond	dence concerning this matter to the following:	
	Guillermo A. Saade	
	Name of Person	
	CORPUSA CARS, LLC	•
	Firm/Company	~2
	8604 NW 70th Street	ALC: I
	Address	
	Miami, FL 33166-2643	TASSET OF
	City/State and Zip Code	The state of
	urbandt@bellsouth.net E-mail address: (to be used for future annual report notification)	_ SX 🔐 🐪
For further information cor	ncerning this matter, please call:	10 SO
Guillermo	at (
Name of I	Person Area Code & Daytime Telephone Nu	unber

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□\$30.00 Filing Fee &

Certificate of Status

Enclosed is a check for the following amount:

\$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661, Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORPUSA CARS, LLC			
(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears on our recordiability Company)	<u>is.</u>)
The Articles of Organization for this Limited Li Florida document number <u>L12000138910</u>	ability Company	were filed on 11/01/2012	and assigned
This amendment is submitted to amend the follo	owing:	•	
A. If amending name, enter the new name of	the limited liab	oility company here:	7 . 2
RAM-SON CARS, LLC			70.17
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ited Liability Company," the designa	The second secon
Enter new principal offices address, if applic	able:	8604 NW 70th Street	
(Principal office address MUST BE A STREE	T ADDRESS)	Miami, FL 33166-2643	
Enter new mailing address, if applicable:		8604 NW 70th Street	의 기가 명 기가 명 기가 명 기가 명 기가 명 기가 명 기가 명 기가 명
(Mailing address MAY BE A POST OFFICE BOX)		Miami, FL 33166-2643	
B. If amending the registered agent and/oregistered agent and/or the new registered of Name of New Registered Agent:	fice address her	<u>e</u> :	enter the name of the new
New Registered Office Address:	8604 NW 7		
		Enter Florida stre	
	Miami		ida 33166-2643
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title Name Address Type of Action

MGR Ruben D. Marquez Moreno 8671 NW 111th Ct

Doral, FL 33178

Remove

		Kentove
	SEURETKAY BE JIATE TALLARAS XEE, FLORID.	
		Add Remove
		Add Remove
		Add Remove

If amending	g any other information, enter	change(s) here: (Attach additional sheets, if necessary.)
		·
-		

•		•

Nove	mber 2	2012 A MI
ted	*	-
		AT-SWALLY
	Signature of a	member or authorized representative of a member
	Guillermo A. Saade	
***		Typed or printed name of signee
		Page 3 of 3

Filing Fee: \$25.00

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