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(Requestor's N	lame)
(Address)	
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PICK-UP WA	MAIL MAIL
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COVER LETTER

Division of Corp	porations		
SUBJECT:	Name of Person Area Code Daytime Telephone Number losed is a check for the following amount:		
The enclosed Articles of a	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ndence concerning this matter to	o the following:	
	Juan C Velez		
		Name of Person	
	Universal Auto Sales LLC		
·		Firm/Company	
	895 Diplomat Dr STE 102E	:	
		Address	
	Debary FL 32713		
	universalautosalest)5@email		
			cation)
For further information c	oncerning this matter, please ca	И:	
Juan C Velez		386 215-5415	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for tl	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

100

Registration Section

TO:

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

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

1 A)	·forida Limited Erability Company)		
The Articles of Organization for this Limited Liabil Florida document number 1.14000161901	lity Company were filed on <u>07:09/2019</u> 10-16-14	and assign	ed
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:		
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abl	reviation "L.L.C	
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u> </u>		
	registered office address on our records, enter	the name of	the nev
registered agent and/or the new registered office	e address here:	💯 🕏 🌣	
			<u>n</u>
Name of New Registered Agent:			<u>(</u>
New Registered Office Address:		50	
	Enter Florida street address	I.*	
_	Florida		
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Francisco Diaz	604 Sugar Ridge Dr	
		Deland FL 32720	
			■ Remove
		 	☐ Change
			☐ Remove
			☐ Change
 -	·		Add
			Remove
			☐ Change
			
			□ Remove
			Change
			☐ Remove
			Change
			Add
			☐ Remove
			Change

	mation, enter change(s) her			
		•	41-1	
Effective date. If other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02. Autr: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier by The 90th day after the record is filed. Dated July 69 2019 Signature of a member or authorized representative of a member.				
1.11.11				
If an effective date is listed, the date Note: If the date inserted in thi	must be specific and cannot be prior shock does not meet the applic	r to date of filing or more than cable statutory filing requir	90 days after filing.) Pursuant to 605.02	207 (as t
ne record specifies a dela The 90th day after the r	yed effective date, but no ecord is filed.	ot an effective time, a	t 12:01 a.m. on the earlier	of:
July 09 Dated	2019			
		<u> </u>		
	1/2			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00