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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Document Number)

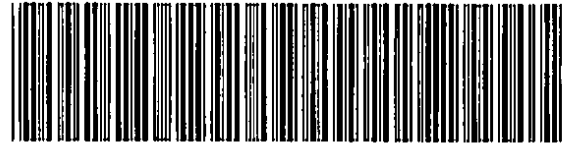
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REC. DIV. OF STATE  
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December 16, 2021

*Via Certified Mail*

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CERTIFIED ARBITRATOR  
ALSO ADMITTED IN GEORGIA  
++ALSO ADMITTED IN NEW YORK

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

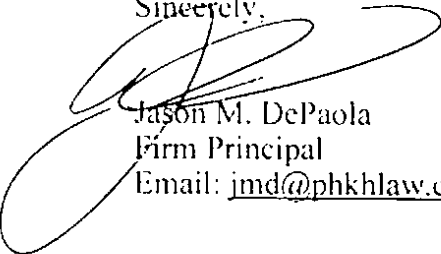
Re: DRIVENATION USA HOLDINGS, LLC  
Articles of Amendment to Articles of Organization  
OFN: 12732-07

Dear Sir or Madam:

Enclosed please find the fully-executed Articles of Amendment to Articles of Organization for the above-referenced limited liability company. The intent of the Articles of Amendment is to change the name of the company as well as add an additional manager. Also enclosed is a check for \$25.00 to provide payment for the filing fee. Please process the filing of the Articles of Amendment as soon as possible.

If you have any questions, please do not hesitate to call me at 941.748.3770. Thank you.

Sincerely,



Jason M. DePaola  
Firm Principal  
Email: [jmd@phkhlaw.com](mailto:jmd@phkhlaw.com)

JMD:jms  
Enclosures (2)

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

DRIVENATION USA HOLDINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 1, 2021 and assigned Florida document number L21000453614.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

COASTAL RENT A CAR, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_

*City*

*State*

*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.*

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STATE

If Changing Registered Agent, Signature of New Registered Agent



D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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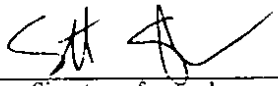
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** 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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated DECEMBER 13, 2021



\_\_\_\_\_  
Signature of a member or authorized representative of a member

SCOTT STILLINGS, MANAGER

\_\_\_\_\_  
Typed or printed name of signee