9/12/22, 11:37 AM

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : AV ACCOUNTING ASSOCIATES CORP

Account Number : I20220000141 Phone : (954)937-590

Phone : (954)937-5905 Fax Number : (954)208-0209

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

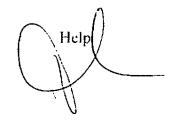
SEP 12 PM 3: 11

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 2 GO MOTORS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu



To:

COVER LETTER

Registration Section TO: Division of Corporations 2 00 MOTORS LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: JOSE J BRITO CONTRERAS Name of Person 2 GO MOTORS LLC Firm/Company 8434 NW 66TH STREET Address **DORAL, FL 33166** City/State and Zip Code jjpico6@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 557-0223 JOSE J BRITO CONTRERAS

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OTORS LLC	·
(Name of the Limited Liability Con (A Florida Limi	many as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	•	and assigned
Florida document number L22000041820		
This amendment is submitted to amend the following:		·
A. If amending name, enter the new name of the limited li	ability company here:	
		202
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the at	breviation "L.C."
Enter new principal offices address, if applicable:	8434 NW 66TH STREET	<u> </u>
(Principal office address MUST BF. A STREET ADDRESS)	DORAL, FL 33166	2 2
		St. 3
		Γ
Enter new mailing address, if applicable:	8434 NW 66TH STREET	16
(Mailing address MAY BE A POST OFFICE BOX)	DORAL, FL 33166	,
B. If amending the registered agent and/or registered office	ce address on our records, enter the nam	e of the new registe
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	•
	, Florida	·
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>	

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.

MGR = Manager

If amending Authorized Person(s) authorized	to manage,	enter the ti	itje, name, and	i address of each per	son being added
or removed from our records:			 , , ' ,	;	

Title	<u>Name</u>	Address	Type of Action
MGR	DANIEL R BOSCAN PETIT	8434 NW 66TH STREET	
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