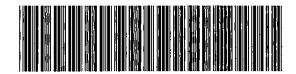
(109 0000) 92149

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PICK-UP WAIT MAIL				
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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Yancov and Sons Automotive, 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:
Greg Vancar Name of Person Vancar and Sons Automotive, LLC Firm/Company
2190 Sunset Circle
City/State and Zip Code Plancay @ tampabay, vv. com E-plan address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pamela Vancav at (727) 581-8372 = Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: \$25.00 Filing Fee \$\ \text{Solution}\$\$\$ S55.00 Filing Fee \$\ \text{Certificate of Status}\$\$\$ Certificate of Status \$\ \text{(additional copy is enclosed)}\$\$\$ Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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 TO ARTICLES OF ORGANIZATION OF

Yancar and Sons	Automotive LLC	1	
(Name of the Limited Liability Con (A Florida Limite	npany as it now appears on our recorded Liability Company)	<u>s.</u>)	
	0		
The Articles of Organization for this Limited Liability Comp	any were filed on 772570	and assigned	
Florida document number <u>L 09 6000 92 149</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited l	iability company here:		
The new name must be distinguishable and end with the words "L. L.C."	imited Liability Company," the designa	tion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		the said	
(Principal office address MUST BE A STREET ADDRESS	<u>)</u>	温馨 8 刊	
		CO TOTAL MARKET	
T			
Enter new mailing address, if applicable:		C (17	
(Mailing address MAY BE A POST OFFICE BOX)	-1	<u> </u>	
		18*	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address t	office address on our records, <u>en</u> here:	nter the name of the new	
Name of New Registered Agent:		····	
New Registered Office Address:			
	Enter Florida street address		
	, Floric		
•	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 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 Type of Action Title Name Address Pamela Yancar Remove ☐ Add Remove ☐ Add Remove □Add ☐ Remove ∐Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Oct. 14 Dated

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00

Signature of a member or authorized representative of a member