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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: DEALER CONSULTING SERVICES

Account Number : I20010000121

Phone Fax Number : (305)758-9001 : (888)501-2390

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

Email Address: CORPORATIONS@DCSMIAMI.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE CAR STORE MIAMI, LLC

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From: Sandra Perez

Fax: (888) 501-2390

To: "8506176383@rcfax.co Fax: (850) 617-8383

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		COVER LETTER	(((H17000077695 3)))
TO: Registration Sec Division of Corp	ction porations , * * *	. ♥, . ∳	
THE CAR S	STORE MIAMI, LLC		
	Registration Section Division of Corporations , * THE CAR STORE MIAMI, LLC Name of Limited Liability Company Seed Articles of Amendment and fee(s) are submitted for filing. nurn all correspondence concerning this matter to the following: ALEXANDRA BAUTISTA Name of Person DEALER CONSULTING SERVICES Firm/Company 7537 NW 7TH AVE Address MIAMI,FL 33150 City/State and Zip Code CORPORATIONS@DCSMIAMI.COM E-mail address: (to be used for future annual report notification) er information concerning this matter, please call: NDRA BAUTISTA Name of Person Area Code Daytime Telephone Number 1 1 2 2 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
		_	
	ALEXANDRA BAUTIST	`A	
		Name of Person	
	DEALER CONSULTING	SERVICES	
	<u> </u>	Firm/Company	
	7537 NW 7TH AVE		
		Address	
	MIAMI,FL 33150	v	
		·	
	1.5		the state of the s
	E-mail address: (to be used for future annual repor	nonneanon)
For further information co	oncerning this matter, please c	all:	P. C.
ALEXANDRA BAUTIS	TA	at ()	三
Name of	Person	Area Code Da	aytime Telephone Number 22
Enclosed is a check for th	e following amount:		<u> </u>
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	S60.00 Filing Ree, O

MAILING ADDRESS:

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

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

From: Sandra Perez

Fax: (888) 501-2390

AKTICLES OF AIVIENDIVIENT

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TO ARTICLES OF ORGANIZATION OF

THE CAR STORE MIAMI, LLC		
(Name of the Limited Liability C (A Florida Lia	Company as it new appears on or mited Liability Company)	ır records.)
The Articles of Organization for this Limited Liability Com Florida document number <u>L17000016168</u>	npany were filed on 01/23/20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designat	ion "L1.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	SS)	**
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		TACAMA 22
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	red office address on our is here:	records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	eet uddress
		, 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

From: Sandra Perez Fax: (888) 501-2390 To: "8508176383@rcfax.co. Fax: (850) 617-6383 Perez Authorized 1 11300(5) authorized 2 11300(or removed from our records: (((H17000077695 3))) MGR = Manager AMBR = Authorized Member **Title** Name Address Type of Action MGR DANIEL ALEJANDRO DIGLIO D'ALTO 6301 NW 87 AVE MIAMI, FL 33166 ∐ Add □ Remove ☐ Change MGR TOMASINO DIGLIO □ Add □ Remove 6301 NW 87 AVE MIAMI, FL 33166 Change □ Add □ Remove ☐ Change ☐ Remove ☐ Change □ Add □ Remove

□ Change

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Dated	IARCH 21	2017	•	•	
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	Signature	of a member or authoriz	ed representative of a men	iner	

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