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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : DEALER CONSULTING SERVICES, INC.

Account Number : I20010000121 : (305)758-9001 Phone

Fax Number : (888)501-2390 , i

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

Email Address: CORPORATIONS@DCSMIAMI.COM

LLC AMND/RESTATE/CORRECTOR M/MG RESIGN ELITE MOTOR CARS OF MIAMI LLC

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COVER LETTER

	legistration Se Division of Cor			
enn inca		TOR CARS OF MIAMI LLC		
SUBJECT	ı; <u></u> _	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		JANIXA RAMOS	٠.	
			Name of Person	
		DEALER CONSULTING	SERVICES, INC.	
			Firm/Company	
		7537 NW <i>T</i> TH AVE		
			Address &	
		MIAMI, FL 33150	£	
			City/State and Zip Code	<u></u>
		CORPORATIONS@DCSN		_
		E-mail address: (to be used for future annual report notif	(cation)
For furthe	r information c	oncerning this matter, please c	all:	
JANIXA	RAMOS		305 758-9001	
	Name o	f Person	at (e Telephone Number
Enclosed	is a check for t	ne following amount:		
\$25.0	0 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fer-& 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/COURIER ADDRESS:

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

Fax: (888) 501-2390

To: 8506176383@rcfav.con Fax: (850) 017-8383

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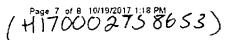
ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELITE MOTOR CARS OF MIAM	ILLC		
(Name of the Lind)	ed Liability Com ps (A Florida Limit ed L	ny as it now appears on our re liability Company)	cords.)
The Articles of Organization for this Limited Li		were filed on 07/03/2017	and assigned
Florida document number L17000143493	·,	AU	
This amendment is submitted to amend the follo	owing:	···:	
A. If amending name, enter the new name o	f the limited liab	ility company here:	
The new name must be distinguishable and contain the w	ords "Limited Linbi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic		5700 NW 27TH AVE	
Principal office address MUST BE A STREET ADDRESS		MIAMI, FL 33142	
			. ~
Enter new mailing address, if applicable:		5700 NW 27TH AVE	QCT
(Mailing address MAY BE A POST OFFICE BOX)		MIAM1 FL 33142	
100			
B. If amending the registered agent and registered agent and/or the new registered of	or registered of the registere	office address on our re r <u>e</u> :	cords, enter the name of the
Name of New Registered Agent:	EDGAR M G	UANUNA	
New Registered Office Address:	5700 NW 27T	HAVE	addrass
		enier (tariau sireer)	
	MIAMI	Clrv	_, Florida 33142 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>	Address	Type of Action
AMBR	VEGA CASTRO, ERIKA V	2233 NW 77TH TER	□ Add
		MIAMI, FL 33147	⊞ Remove
			☐ Change
AMBR	GUANUNA, EDGAR M	5700 NW 27TH AVE	
		MIAMI, FL 33142	□ Remove
			☐ Change
		.1	□ Add
			□ Remove
			Change
			□ Add
			☐ Remove
			Change
		- 1g	Add
			☐ Remove
			Add
			☐ Remove
			Change

From: Sandra Perez

Fax: (888) 501-2390

To: 8506178383@rcfar.con Fav: (850, 817-9383 Page 8 jof.8 10/19/2017 1:18 PM

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	والمراجعة		
	er ager gester hålt betyreten skrivere værere blevere skriveter forskrivere og en ryspeskle de flereres.		
			
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fective date, if other than the di n effective date is listed, the date must b iter. If the date inserted in this bloc cument's effective date on the Dep	ate of filing: c specific and cumot be prior to date of filing or m k does not meet the applicable statutory filin artment of State's records.	optional) nore than 90 days after filing.) Pursu ng requirements, this date will n	uant to 605.6 of he lister
record specifies a delayed of the 90th day after the recor	effective date, but not an effective to dis filed.	time, at 12:01 a.m. on th	ne earlie
OCOTBER 19	2017		
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