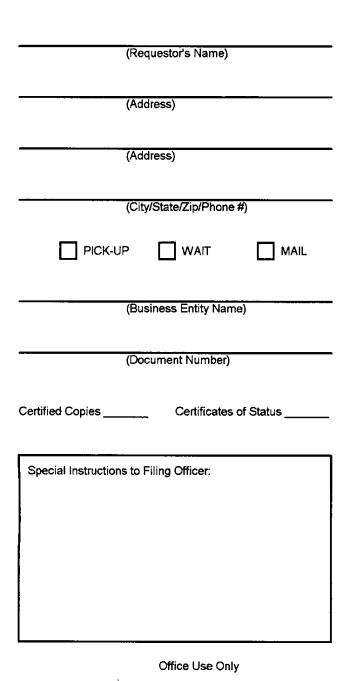
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Registration So Division of Con			
CIID I	Stephens C	ar & Truck Sales LLC		
SOBJ	ECI.	Name of Lim	uited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ondence concerning this matter	to the following:	
		Ronald M Stephens		
			Name of Person	
		Stephens Car & Truck Sale	es LLC	
			Firm/Company	<u> </u>
		1812 Cottage Grove Rd		
			Address	
		Tallahassee Florida 32303		
			City/State and Zip Code	
		s.mitch42@yahoo.com		
		E-mail address: (to be used for future annual report notif	ication)
For fu	rther information o	concerning this matter, please c	all:	
			at () Area Code Daytime	
	Name o	of Person	Area Code Daytime	: Telephone Number
Enclo	sed is a check for t	he following amount:		
≅ \$2	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:

TO:

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 **ARTICLES OF ORGANIZATION** OF

Fhe Articles of Organization for this Limited Liability Company					
the Articles of Organization for this Limited Liability Company were filed on 2-26-2008 lorida document number L08000020545					
This amendment is submitted to amend the following:					
A. If amending name, <u>enter the new name of the limited lial</u>	ability company here:				
he new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or th	e abbreviation "L.L	C."		
Enter new principal offices address, if applicable:			₹;;		
Principal office address MUST BE A STREET ADDRESS)		<u> </u>			
		APR	<u> </u>		
		-6	SSI		
nter new mailing address, if applicable:		2	, in c		
Mailing address MAY BE A POST OFFICE BOX)		ណ៉			
-		30	20 A		

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
VP	Arthur Hernandez	3136 Layla St Tallahassee Fl 32303	Add
			■ Remove
			☐ Change
			Add
			Remove
			Change
			Add
			□ Remove
			☐ Change
			
			□ Remove
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