

L090000080438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

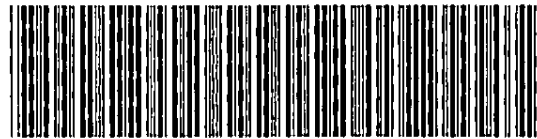
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/09/20--01013--014 **25.00

FILED
2020 OCT -9 AM 11:09
CLERK OF STATE
TALLAHASSEE, FL

11/16/20

Arfarr LLC d/b/a
AUTO EUROPA NAPLES

3135 Terrace Ave
Naples, FL 34104

www.AENaples.com
(305) 975-2767

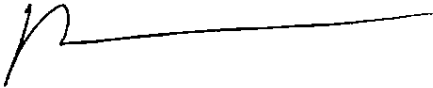
October 7, 2020

State of Florida
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Registered Agent for Arfarr LLC

This letter is confirmation that I, Richard R. Collins, II, am able to assume the position of Registered Agent for Arfarr LLC. I fully understand the duties required of me.

Sincerely,

A handwritten signature in black ink, consisting of a stylized 'R' followed by a long horizontal line.

Richard R. Collins, II

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Arfarr 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:

Martin Kaczmarek

Name of Person

Arfarr LLC

Firm/Company

3135 Terrace Ave

Address

Naples, FL 34104

City/State and Zip Code

marty@acnaples.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martin Kaczmarek

305

975-2767

at (_____) _____

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Artarr LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8/19/2009 and assigned
Florida document number L09000080438.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2435 Tamiami Trail E

Unit 4

Naples, FL 34112

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2610 64th St SW

Naples, FL 34105

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Richard R. Collins, II

New Registered Office Address:

2610 64th St SW

Enter Florida street address

Naples

City

Florida

34105

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

1. Appointing 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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|------------------------|------------------|---|
| MGR | Richard R. Collins, II | 2610 64th St SW | <input checked="" type="checkbox"/> Add |
| | | Naples, FL 34105 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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 DEPT. OF STATE
 TALLAHASSEE, FL

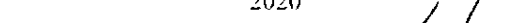
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U.S. DIST. CT. STATE
PALM BEACH, FL

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2020 OCT -9 AM 11:09
U.S. DEPT. OF STATE
WILLIAMSBURG, VA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

October 7, 2020



Signature of a member or authorized representative of a member

Typed or printed name of signee