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MAIL
Status

Office Use Only



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SECRETARY OF STATE

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COVER LETTER

TO: Registration S Division of Co			
	CARS USA LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	CARLOS FIGUEIRA		
		Name of Person	
		Firm/Company	
	2100 NW 82 AVE		
		Address	· · · · · · · · · · · · · · · · · · ·
	DORAL, FL 33122		
		City/State and Zip Code	
	CARLOS@VALEASINGO		
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
CARLOS FIGUEIRA		305 591-7707	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXOTIC CARS USA LLC			E S		
(<u>Name of the Limited I</u> (A	Liability Comp Florida Limited	any as it now appears on o Liability Company)	ur records.	SEP 2	
The Articles of Organization for this Limited Liabi	ility Company	were filed on $\frac{12/20/20}{12}$		and strened	
Florida document number L10000129758	·		· FL	⁷ (2)	
This amendment is submitted to amend the following	ing:		TATE	2: 56	
A. If amending name, enter the new name of th	e limited lial	oility company here:			
· · · · · · · · · · · · · · · · · · ·					
The new name must be distinguishable and contain the word	s "Limited Liab	ility Company," the designa	tion "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:		2100B NW 82 AVE			
(Principal office address MUST BE A STREET ADDRESS) DORAL, FL 33122					
Enter new mailing address, if applicable:		2100B NW 82 AVE			
(Mailing address MAY BE A POST OFFICE BO	<u>(X)</u>	DORAL, FL 33122			
			<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office			records, enter	the name of the nev	
	water sub-live	<u> </u>			
Name of New Registered Agent:	Edu	ardo Justo			
New Registered Office Address:	2100	NW 82 Ave			
	_	Enter Florida str	eet address		
-	<u>npr</u>		, Florida	33122	
		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

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
MGR	MANUEL MARROQUIN	2100 NW 82 AVE.	Add
		DORAL FL 33122	Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
_			□ Add
			Remove
			Change
			Add
			Remove
			Change
			ETARY Add
			Remove
			ORION Change

					
					
					
			<u> </u>		
					
ective date, if other than the c	09/01/20	15	(ont	ional)	
effective date is listed, the date must e: If the date inserted in this blo	be specific and cannot be pri	ior to date of filing or more	than 90 days afte	er filing.) Purst	uant to 605.0
ument's effective date on the De			equirements, in	is date will if	of be fisted
record specifies a delayed he 90th day after the reco		not an effective tim	ne, at 12:01	a.m. on th	ne earlier
·					
SEPTEMBER 01					
			/	2015	- Andrews
	(1		2	7 1
	Signature of a member or au	thorized representative of	a member	SEP 2	

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Filing Fee: \$25.00