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(Re	questor's Name)	
(Ad	dress)	_
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Registration and Division of Control				
SUBJECT:	Marland M. Name of Lim	otors, LLC ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Wills	im Martin Name of Person		•
	Marl	Name of Person  Motors, LLC Firm/Company		· · ·
	3015	Steeplechase Dr.	<u> </u>	
	Lakelo	City/State and Zip Code  Motors. 1/caar to be used for future annual reportator	<del>.</del>	
	E-mail address: (	ad. motors. 1/caar to be used for future annual reportanti	nail. Com fication)	
For further information	concerning this matter, please ca			
William Name		at ( <u><b>813</b></u> ) <u>786.</u> Area Code Daytim	7076 SS	Same agent
Enclosed is a check for	•			( ***)
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	العييه"

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

Marland Motor	rs, LLC	u mesordo \	<del></del>	
(Name of the Limited Liability Co (A Florida Lim	uited Liability Company)	records.)		
The Articles of Organization for this Limited Liability Company were filed on				
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 I	Liability Company," the designation	on "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS	<u> </u>			
		Fin	20	
		اليا — ( الما حد		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		స్త్రాహ కా	<u> </u>	
		;-m	> (	
		35		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address			e name of the nev	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida stree	et address		
		, 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

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>	<u>Address</u>	Type of Action
MGR	Karena Martin		🗆 Add
		3015 Steeplechase Dr. Lakeland, F1 338	I_  Remove
			Change
AMBR	George Brandy		D Add
		3015 Steep kehase Dr. Lukeland, FL 33811	Remove
			Change
		<del> </del>	Add
			Remove
			Change
			_D-Add
			- Remove
			Change
<del></del>			Change 3
			Remove
		<del></del>	Change
<del></del>			Add
			_□ Remove
			☐ Change

e record specifies a de The 90th day after the Pated	ayed effective date e record is filed.	, but not an effec	tive time, at 12:01	a.m. on the ear	lier of:
fective date, if other that an effective date is listed, the date:  If the date inserted in a locument's effective date on	te must be specific and cam his block does not meet the Department of State	not be prior to date of fili the applicable statutor 's records.	ng or more than 90 days af y filing requirements, t	his date will not be li	isted as th
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Page 3 of 3

Filing Fee: \$25.00