Division of Corporations

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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 Fax Number : (305)758-0506

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN UNIVERSAL POWERSPORTS OF MIAMI L.L.C.

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## **COVER LETTER**

TO:	Registrat Division							
SUBJE	የ የ	U	NIVERSAL POWEI	RSPORTS OF MIAMI L	L.C.			
30001				ted Liability Company				
The en	closed Artic	oles of A	Amendment and fee(s) are sul	bmitted for filing.				
Please	return all co	orrespoi	idence concerning this matter	to the following:				
				Michelle		,.m.1		
				Name of Person			<u> </u>	
			Dea	aler Consulting Services			11 JUN -2	* 1497s
				Firm/Company		SS	-2	-
7537 NW.7th Ave			E C		, Ti			
				Address		20 TH	ÇĐ	
			ļ	Miami, Florida 33150		20.75	ون ونع	
				City/State and Zip Code		<b>3</b> -		
			mi	chefle@dcamiami.com	fleeting)			
Far fur	ther inform	ation co	ncerning this matter, please of	·	in autony			
<u> </u>			Michelle	at (_305 )	758-9001			
	1	Name of	Person	Area Code & Daytin	ne Telephone Number			
Enclose	ed is a chec	k for th	e following amount:					
<b>\$25</b>	.00 Filing F	ec	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Piling Certificate d) Certified C (additional	of Status &		)
	I I	Registra Division P.O. Bo	NG ADDRESS: stion Section of Corporations x 6327 see, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassec, FL 32	on rations enter Circle			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNIVERSAL F	OWERSPORTS OF N	ЛАМI L.L.C.	_
(Name of the Limited L.	iability Company as it now appe lorida Limited Liability Company	ers on our records.)	
The Articles of Organization for this Limited Lial	bility Company were filed on	03/02/2011	and assigned
Florida document number L110000267			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company h	ere:	
Univer	sal Auto Sales of Miami Ll	LC	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany," the designation "LLC	or the abbreviation
Enter new principal offices address, if applicat	ole:	ŗ	<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)		
			0
		r r	
Enter new mailing address, if applicable:		**************************************	
(Malling address MAY BE A POST OFFICE B	<u></u> _	<u> </u>	<b>C9</b>
			777 66
B. If amending the registered agent and/or registered agent and/or the new registered of the		our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street address	<i>i</i>
	, Florida		
	City		Zip Code
New Registered Agent's Signature, if changing Re	elstered Agent:		
I hereby accept the appointment as registered the provisions of all statutes relative to the proaccept the obligations of my position as registed being filed to merely reflect a change in the recompany has been notified in writing of this change in the company has been notified in writing of this change in the change in th	oper and complete performance ered agent as provided for in ( gistered affice address, I here	ce of my duties, and I am f Chapter 608, F.S. Or, if th	familiar with and his document is

Page 1 of 2

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If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
<del></del>			Add Remove
			Add Remove
			Add Remove
			Add
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	ze(s) here: (Attach addittonal sheets, if necess	
			11 JUN-2
	June 08th 20	01411	2 4 8
Dated		or sufferized representative of a member	<b>5</b>
	\	arios de la Arena or printed name of signee	

Filing Fee: \$25.00

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