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To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name : THERREL BAISDEN, LLP

Account Number : I20140000065 Phone

: (305)371-5758

Fax Number

: (305)371-3178

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

Email Address: MHasner OTherrel bais

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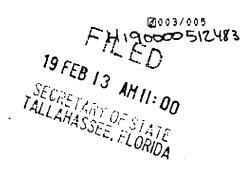
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COVER LETTER

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		PF AUTOS, LLC							
SUBJE	CT:	Name of Limi	ted Liability Company						
The encl	losed Articles of	Amendment and fee(s) are sub	nitted for filing.						
Please re	eturn all correspo	ndence concerning this matter	to the following:						
		MARK M. HASNER, ESC) .						
			Address SUITE 2950 Address 3131 City/State and Zip Code ELBAISDEN.COM ess: (to be used for future annual report notification) ase call: at () Daytime Telephone Number STREET/COURIER ADDRESS:						
		THERREL BAISDEN, LL	P						
		,	Firm/Company						
		1 SE 3RD AVENUE, SUI	TE 2950						
			Address						
		MIAMI, FLORIDA 33131							
		MHASNER@THERRELB	AISDEN.COM to be used for future annual report no	diffication)					
For furt	her Information o	concerning this matter, please of		·					
MARK	M. HASNER, E	SQ.	ni ()						
	Name o	l Person	Area Code Dayti	me Telephone Number					
Enclose	d is a check for t	he following amount:							
\$25	.00 Piling Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy					
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COUI Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassec, PL	ilon grations Center Circle					

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



PF AUTOS, LLC		<u> </u>
(Name of the Limited	Liability Company as it now appears on our records. Florida Limited Liability Company))
The Articles of Organization for this Limited Liab	oility Company were filed on 08-04-2011	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
AUTO DRIP, LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	nle:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered officers.	r registered office address on our records, ce address here;	enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:	_ ·	rida

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

Page 1 of 3

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member							
<u>Title</u>	<u> Name</u>	Address	Type of Action				
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		<u></u>	☐ Remove				
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