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D. BRUCE
JAN 2 8 2012
EXAMINER

COVER LETTER

PO: Registration S Division of Co		·				
SUBJECT:	1-2-3 A	uto Rental LLC				
SOURCE,		ame of Limited Liability Company				
	f Amendment and fee(s) are sul					
		Jorge Gonzalez				
Name of Person						
Firm/Company						
•		4019 N W 28 St				
		. Address		****		
Miami ,Florida 33142					12 J	-
		City/State and Zip Code		AHASSEE.	JAN 2	
	E-mail address: (to be used for future annual report not	ification)	HY (Ο,	
For further information	concerning this matter, please	call:		E OF S	<u>*</u>	
		205	074 0776		6 3	_
	onica Jaramillo of Person	at (<u>305</u>) Area Code & Dayti	871 0776 me Telephone Numbe	≥		
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 enclose	ed) Certified	ate of Stati		sed)
MAILING ADDRESS:		STREET/COUR	RIER ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	1-2-3-Auto	Rental LLC				
(<u>N</u> a	me of the Limited Liability Comp (A Florida Limited	any as it now appea Liability Company)	ars on our records.)			
The Articles of Organization	for this Limited Liability Compan	y were filed on	August -8/2011	and assigned		
Florida document number	L11000093699					
This amendment is submitted	to amend the following:					
A. If amending name, enter	the new name of the limited lia	bility company he	re:			
The new name must be distingu "L.L.C."	ishable and end with the words "Lin	nited Liability Comp	nany," the designation "Ll	C" or the abbreviation		
Enter new principal offices :	address, if applicable:					
(Principal office address MU	ST BE A STREET ADDRESS)					
				7:4		
.				行るる		
Enter new mailing address, (Mailing address MAY BE A	• •			AN 2		
muning address MAT BE A	POST OFFICE BOX					
	ered agent and/or registered o			The last		
registered agent and/or the i	new registered office address he	<u>re</u> :		W %		
Name of New Regis	ered Agent:	·· • • • • • • • • • • • • • • • • • •				
New Registered Offi	ce Address:			•		
		E _I	nter Florida street addr	ess		
		, 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 608, 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 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 = Manager

MGRM = Managing Member **Title** Name **Address Type of Action** MGR Jorge Luis Gonzalez Ortiz 4019 N W 28 St ☐ Add Remove Miami Florida 33142 Jorge Gonzalez MGRM 4019 N W 28 St ✓ Add Remove Miami, Florida 33142 ☐ Add Remove ☐ Add Remove \square Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ALL MASSEE FLORIDA 01/17/2012 Dated __ Monica L TARAWIIIo
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00