#1/1000/07/45

હે		
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
_	_	_
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer	
Special instructions to i	riing Oncer.	
!		

Office Use Only



300256435343

02/10/14--01030--010 **30.00

PILED

2014 FEB 10 PH 3: 32

SECRETARY OF STATE OR INTERPRETARY OR IN

K.SALY EXAMINER FEB 1 & 2014

COVER LETTER

Division of Corpo			
SUBJECT: Banv	ean LLC		
<u></u>	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Adedeji	Gbago	
	0	Name of Person	
		Firm/Company	
	(100 ·	rimicompany	
	4280 Mide	aldorok Rd, Ap	+122
	0 1 1 5	Address	
	Urlando, f	-L. 32811	
	destax	City/State and Zip Code	\sim
	E-mail address: (to be used for future annual report notifi	
For further information con	cerning this matter, please ca	all:	
Adedei (han	321, 297-1	0581
Name of P	erson	Area Code Daytime	Telephone Number
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 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

2014 FA	FILED
TASECRET LLAHA	TARY OF STATE ORIDA

Zip Code

Banycao Limited Liability Company (A Florida Limited Liab	as it now appears on our records.) ALLAHASSEE, FLORIDA Dility Company)
The Articles of Organization for this Limited Liability Company we Florida document number <u>LIDDD107145</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	y company here:
The new name must be distinguishable and end with the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
-	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

<u> Citle</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			□ Add
			Remove
			Add
			□ Remove
			
			□ Remove
			Add
			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if	necessary.)
Purchosing vehicles including salvage	<u> </u>
vehicles at auto auctions for the purp	
	ainna
and exporting of auto parts.	
, ,	
	. <u></u>
E. Effective date, if other than the date of filing:	optional)
E. Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of the date this document is filed by the Florida Department of State)	optional) lays after
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 c	optional) days after
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 c the date this document is filed by the Florida Department of State)	optional) days after
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 c the date this document is filed by the Florida Department of State)	optional) lays after
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of the date this document is filed by the Florida Department of State) Dated February 4, 2014.	optional) lays after

Page 3 of 3

Filing Fee: \$25.00