L11000123723

(Requestor's Name)
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(Business Entity Name)
(Document Number)
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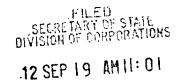
COVER LETTER

TO:	Registration Section Division of Corpora			· .`	·	
SHRJE	ECT:	The Junk Ca	ar Company, LLC			
			ed Liability Company			
The en	closed Articles of Ame	ndment and fee(s) are sub	mitted for filing.			
Please	return all corresponder	ce concerning this matter	to the following:			
	_		Sharon Simmons			
			Name of Person			
The Junk Car Company, LLC						
	_		Firm/Company		····	
		108	300 US Hwy 19 N #11	8		
			Address			
Pinellas Park, FL 33782						
			City/State and Zip Code		- 	
	sharon@thejunkcarcompany.com E-mail address: (to be used for future annual report notification)					
For fu	rther information conce	rning this matter, please c			,	
	Sharon	Simmons	at (727) Area Code &	599	9-1663	
	Name of Per	son	Area Code &	Daytime Tel	lephone Number	
Enclos	sed is a check for the fo	llowing amount:				
\$2	5.00 Filing Fee]\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed)	Sectificate 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



The	Junk Car Company LL	_C \			
(Name of the Limited (A	e Junk Car Company LL Liability Company as it now appe Florida Limited Liability Company	ars on our records.)			
The Articles of Organization for this Limited Li	ability Company were filed on	10/31/11	and assigned		
Florida document numberL11000123					
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liability company h	ere:			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Com	pany," the designation "LL	C" or the abbreviation		
Enter new principal offices address, if applic	able:				
(Principal office address MUST BE A STREE	T ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	<u></u>				
B. If amending the registered agent and/ registered agent and/or the new registered of		our records, enter th	e name of the new		
Name of New Registered Agent:					
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·			
		Enter Florida street address			
		, Florida	7. 0.1		
	•	·	Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as registere	ed agent and agree to act in this	s capacity. I further agr	ee to comply with		

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 <u>Title</u> **Type of Action** Name **Address** MGRM Verlie Simmons 10800 US Hwy 19 N #118 Pinellas Park, FL 33782 ☐ Add
☑ Remove Remove ☐ Add Remove ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 18 2012 Dated Signature of a member or authorized representative of a member Sharon Simmons Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00