

L120000047106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

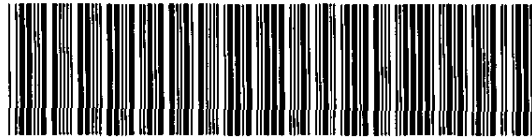
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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11/06/14--01002--007 **25.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 NOV -6 PM 11:17
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

APPROVAL
AND
FILED
14 NOV -6 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV - 6 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S2H Motors LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hershel Roby
Name of Person
FrontLine Auto Brokers
Firm/Company
537 Silver Slipper Lane
Address
Tallahassee / FL / 32303
City/State and Zip Code
Hershel@frontlineautobrokersfl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hershel Roby at (850) 524-3572
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

J3H Motors LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

APPROVED
AND
FILED
14 NOV -6 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 4/5/12 and assigned
Florida document number L12000047106.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

FrontLine Auto Brokers *FL* LLC

The new name must be distinguishable and end with the words "Limited Liability 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)

537 Silver Slipper LN Suite-E
Tallahassee, FL 32303

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

537 Silver Slipper LN Suite-E
Tallahassee, FL 32303

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Hershel D. Roby

New Registered Office Address:

537 Silver Slipper LN Suite-E.

Enter Florida street address

Tallahassee

City

Florida

32303

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 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.

[Signature]
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:

MGR = Manager

AMBR = Authorized Member

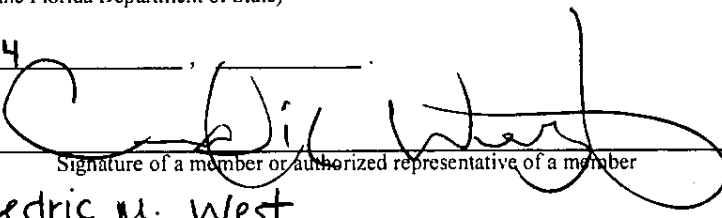
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
NGRM	Cedric West	537 Silver Slipper LN Suite E Tallahassee, FL 32303	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Change <input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 11/6/2014 , _____


Signature of a member or authorized representative of a member

Cedric W. West

Typed or printed name of signee

11/06/14

CORPORATE DETAIL RECORD SCREEN

11:22 AM

NUM: L13000160807 ST:FL ACTIVE/FL LIM LIAB FLD: 11/12/2013

TOTAL CONTR: 0.00

NAME : FRONTLINE AUTO BROKERS, LLC.

PRINCIPAL: 6501 JACOBS DIVE

ADDRESS FORT MYERS, FL 33908

RA NAME : DEERWESTER, SHARON

RA ADDR : 6501 JACOBS DIVE

FORT MYERS, FL 33908 US

ANN REP :

(2014) W 04/28/14

1. MENU, 3. MGR/MEM, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR: