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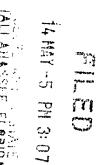
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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MAY 1 2 2014

T. BROWN

COVER LETTER

TO:

Registration Section
Division of Corporations

ER AUTO-SALES AND LEASING, 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:

| EVELYN TUTEIN |
|----------------------------------|
| Name of Person |
| |
| Firm/Company |
| 661 BLANDING BLVD SUITE 281 |
| Address |
| ORANGE PARK, FL 32073 |
| City/State and Zip Code |
| EVELYN@ERAUTOSALESANDLEASING.COM |

For further information concerning this matter, please call:

| EVEI | $_{YN}$ | TU | TEI | N |
|-------------|---------|----|-----|---|
|-------------|---------|----|-----|---|

ູ,904、589-5825

Name of Person

Area Code

E-mail address: (to be used for future annual report notification)

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)

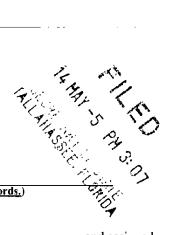
MAILING ADDRESS:

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



ER AUTO SALES AND LEASING, LLC

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

| The Articles of Organization for this Limited Liability | Company were filed on 4/18/2012 | and assigned |
|--|--|------------------------------|
| Florida document number L12000053116 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the li | mited liability company here: | |
| 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 ADD | DRESS) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office age | gistered office address on our records, <u>idress here</u> : | enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Flori | |
| | 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 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

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:

| Authorized Member being added or removed from our records: | |
|--|--|
| MGR = Manager | |
| AMBR = Authorized Member | |

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|---------------------|----------------------|-----------------|
| MGR | ABDULLAH, NEFERTITI | 661 BLANDING BLVD | |
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| | | ORANGE PARK, FL 3207 | |
| | 188141 | | |
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| inchang any other information, enter th | nange(s) here: (Attach additional sheets, if necessary.) |
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| ffective date, if other than the date of filing the effective date must be specific, cannot be prior to date the date this document is filed by the Florida Department | te of receipt or filed date and cannot be more than 90 days after |
| ated APRIL 30 | 2014 |
| aleu, | ·· |
| | |
| Signature of a m | nember or authorized representative of a member |
| EVELYN TUTEIN | |
| | |

Page 3 of 3

Filing Fee: \$25.00