1200056305

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phor	ne #)
PICK-UP	MAIT	MAIL
(Bi	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	
		Λ

Office Use Only

B. KOHR
JUL 1 0 2012
EXAMINER



400237199964

07/09/12--01049--015 **25.00

12 5年 9 階 3:09

SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

D: Registration Section	om ·	;b	
Division of Corpo			
CADC		TED ALITO COLL	ITIONOLLO
JBJECT: CARS		TED AUTO SOLU	J HONS LLC
	Name of Limi	ted Liability Company	
he enclosed Articles of An	nendment and fee(s) are sub	omitted for filing.	
	• • • • • • • • • • • • • • • • • • • •	·	
ease return all corresponde	ence concerning this matter	to the following:	
	JO	DRGE IZQUIERDO J	IR
•		Name of Person	
	CARS'MART INT	EGRATED AUTO S	OLUTIONS LLC
,		Firm/Company	
	5935 RA	VENSWOOD RD, B	AY E-10
		Address	
	FORT	LAUDERDALE, FL	33312
		City/State and Zip Code	
	JORG	3E42189@YAHOO.0	СОМ
•	E-mail address: (to be used for future annual re	port notification)
For further information cond	perning this matter, please c	eall:	
JORGE I	ZQUIERDO JR	at (_786)	387-0375
	Name of Person		& Daytime Telephone Number

\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

\$30.00 Filing Fee &

Certificate of Status

\$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARS'MART INTEGRATED AUTO SOLUTIONS 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 Liabilit	y Company were filed on	04/25/2012	من and assigned
Florida document number L12000056305			•
This amendment is submitted to amend the following	z :		
A. If amending name, enter the new name of the	limited liability company her	<u>re</u> :	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	ODRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ROBERTO E SARMIENTO	318 SW 192nd AVE PEMBROKE PINES,FL 33029	✓ Add Remove
**************************************			Add Remove
			Add Remove
			Add Remove
 4			AddRemove
····			Add Remove
D. If amer —	nding any other information, enter chang EIN: 45-515832	ge(s) here: (Attach additional sheets, if necessar	y.)
Dated	st.	012	
	JOR	r or authorized representative of a member GE IZQUIERDO JR I or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00