## L12000060311

(Re	equestor's Name)	<u> </u>
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(Do	ocument Number)	
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## **COVER LETTER**

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Registration Section

TO:

Division (	of Corp	orations			
		INEST AUTO SALES, LLC			
SUBJECT:	Name of Limited Liability Company				
The enclosed Artic	cles of A	amendment and fee(s) are sub	omitted for filing.		
Please return all co	orrespon	dence concerning this matter	to the following:		
		FARID OUAOUKORRI			
			Name of Person		-
		TAMPA'S FINEST AUTO	SALES.LLC		
			Firm/Company	<del></del>	
		P O BOX 16247			
			Address		
		TAMPA, FL 33687			بر. <u></u> ء - :
			City/State and Zip Code		. ; 
		TAMPAFINESTAUTOSA	•		
		E-mail address: (	to be used for future annual report no	tification)	-:
For further informa	ation co	ncerning this matter, please c	all:		
FARID OUAOUK	ORRI		813 4517677 at ()		··. —
>	dame of		Area Code Daytir	ne Telephone Number	
Enclosed is a check	c for the	following amount:			
■ \$25.00 Filing I	Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
<u>Mailing A</u> Registra			Street Address: Registration Se	ection	
Division of Corporations		Division of Co	rporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of 2415 N. Monre	Tallahassee oe Street, Suite 8	10	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAMPA'S FINEST AUTO SALES, 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  $\frac{05/09/2023}{1}$ and assigned Florida document number \_\_L12000060311 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 4135 GALL BLVD Enter new principal offices address, if applicable: ZEPHYRHILLS, FL 33542 (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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: BOUCHAIB TOUNSI Name of New Registered Agent: 11012 KEWANEE DR New Registered Office Address: Enter Florida street address

## 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.

Cim

TAMPA

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	BOUCHAIB TOUNSI	11012 KEWANEE DR TAMPA, FL 33617	≣Add
			□Remove
			Change
AMBR	MEHDI TALEB	2717 N 34TH ST TAMPA, FL 33605	□Add
			Remove
			□ Change
			□Àdd
			Remove
			 1+1 □Ghange
			□Add
			□Remove
			□Change
	<u> </u>		<del></del>
			□Remove
			□ Change □ Add
			⊡Add
			□ Change

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:

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated MAY-9 2023		:
Signature of a member or authorized representative of a member		
FARID OUAOUKORRI		=======================================
Typed or printed name of signee	<del></del>	

Filing Fee: \$25.00