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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

C VESKOVSKI

Account Name : TRIPP SCOTT, P.A.

Account Number: 075350000065

Phone : (954)525-7500

Fax Number : (954)761-8475

12 NOV 15 PH # 19

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			

## LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION HOLAND LEASING USA, LLC

Certificate of Status	0
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**EXAMINER** 

**☑** 0002/0003

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document numberL12000073324	•	HOLAND LEASING USA,	LLC	
The Articles of Organization for this Limited Liability Company were filed on	(Na	me of the Limited Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) ny)	<del></del>
his amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  the new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbrev. LLC."  Inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the name of the egistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida				
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		City	, Fiorida	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

MGR = Manager

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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:

MGRM = Managing Member Title <u>Name</u> Address Type of Action MGRM DAY, ERIK 20860 NW 2nd Ave. ☐ Add Miami FL 33169 US Remove MGR DAY, ERIK 20860 NW 2nd Ave √ Add Miami FL 33169 US Remove MGR BITTON, GAD c/o Holand Automotive Group √ Add 8525 Decarie Blvd... ☐ Remove Montreal, Quebec H4P 2J2 **CULLY, JANET** MGR c/o Holand Automotive Group ✓ Add 8525 Decarie Blvd Remove Montreal, Quebec H4P 2J2 ∏Add Remove Remove  $\overline{\sim}$ D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 15 Signature of a member or authorized representative of a member William J Gross, authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00

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