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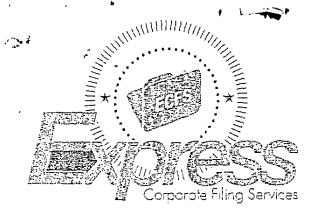
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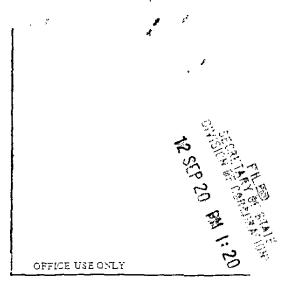


1000 Ponce de Leon Blvd. Suite: 101

Coral Gables, FL 33134

Phone: 305 444 4994

Email-filing@ecfsfiling.com



Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

(Compretion Name)	LIZOOO10418Q	
(೦ಕ್ರಾಥ್ಯಕ್ಷತೆಂಗ ಗಿತ್ರಗಳಿ)	(Cocument #)	
(ಆವಧರಣಕರನ ಗತಿನಾಕ)	(Capamence)	
(Comoration Name)	(Document ₹)	
(Compration Name)	(Document #)	
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☐ Walk in ☐ Pick up time	Certified Copy	
Mail out Will wait	Photocopy Certificate of Status	
NEW HILINGS	AMENDMENTS	
Profit	Amenáment	
NonProfit	Resignation of R.A., Officet/ Director	
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHERFILNGS	REGISTRATION	
Annual Report	QUALIFICATION (%)	
Fictitious Name	Foreign	
Name Reservation ——	Limited Partnership	
	Reinstatement	
	Tedemark	

Other

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AUTOMOTIVE CARE OF DORAL 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 L	Liability Company were filed on	08/14/2012	and assigned	
Florida document number L1200010	4186		_	
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liability company he	<u>re</u> :		
The new name must be distinguishable and end wi"L.L.C."	ith the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applic	cable:	. 		
(Principal office address MUST BE A STREE	ET ADDRESS)			
	• • • •			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			
B. If amending the registered agent and registered agent and/or the new registered o		our records, <u>enter t</u>	he <u>name of the new</u>	
Name of New Registered Agent:	CARLOS RODRIGUEZ			
New Registered Office Address:	6485 NW 87 AVE	·		
	E	Enter Florida street address		
	MIAMI	, Florida	33178	
	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
			Add Remove
			Add Remove
			Add Remove
D. If an	-	nter change(s) here: (Attach additional sheets, if necessity)	
	Please correct the MGRM I	ast name. It now appears as Rodrigues but,	
	it needs to be Rodriguez.		
Dated	September 19	,2012	
		Carlos Kodrigues	
	Signature of	of a member or authorized representative of a member	
	<u> </u>	Carlos Rodriguez Typed or printed name of signee	

Page 2 of 2

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