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J. Shivers JAN 29 2013

COVER LETTER

Division of Corp			
TROTTA	TIRES II, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	mitted for filing.	,
Please return all correspon	ndence concerning this matter t	to the following:	
	JOSE SOTO		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	TROTTA TIRES II, L	LC	
		Firm/Company	
	1919.NW 19TH STR	REET, BUILDING 204	
		Address	
	FORT LAUDERDAL	E, FL 33311	
		City/State and Zip Code	
	JOSE@TROTTAFL.0		
	E-mail address: (t	o be used for future annual report notific	atton)
For further information co	oncerning this matter, please ca	all:	
JOSE SOTO		at (954) 760	-7276
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
1 \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	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

TROTTA TIRES II, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L12000121122</u> .		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	<u>ility company here</u> :	
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1919 NW 19TH STREET, BL	-DG. 204
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL 33	311
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1919 NW 19TH STREET, BI FORT LAUDERDALE, FL 33	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	ffice address on our records, <u>ente</u> <u>e</u> :	r the name of the nev
New Registered Office Address:	Enter Florida street address	AN 16
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		COR 69 (1)
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, and I an	jamiliar with and

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ANGEL R. MEDIAVILLA	51 W. 43 STREET	■ Add
		HIALEAH, FL 33012	∏ Remove
AMBR	DAVID CARDOSO	14869 SW 178 TERRACE	Add
		MIAMI, FL 33187	「 Remove
AMBR	DAVID L. GERBER	2440 DEER CREEK COUNRTY CL	UB ■ Add
		BLVD. APT. # 203	□ Remove
		DEERFIELD BEACH, FL 33442	7
			5 2 2 4 4
			SST Remove!
			Add □ Add
			「I Add
			□ Remove

i amending any other information,	enter change(s) nere: (Attach adaitional sheets, if necessary,
. AS OF JANUARY 1, 2015	, 3 SHAREHOLDERS WERE ADDED TO
TROTTA TIRES II, LLC TO	O EQUAL A TOTAL OF 4 SHAREHOLDERS.
EACH SHAREHOLDER C	OWNS 25% OF TROTTA TIRES II, LLC;
JOSE M. SOTO (MGR), A	NGEL R. MEDIAVILLA (AMBR),
DAVID CARDOSO(AMBR	R) AND DAVID L GERBER (AMBR).
Effective date, if other than the date	of filing: (optional) prior to date of receipt or filed date and cannot be more than 90 days after
Effective date, if other than the date The effective date must be specific, cannot be p	of filing: (optional) prior to date of receipt or filed date and cannot be more than 90 days after
Effective date, if other than the date. The effective date must be specific, cannot be put the date this document is filed by the Florida I Dated Dated	of filing: (optional) prior to date of receipt or filed date and cannot be more than 90 days after Department of State)
Effective date, if other than the date. The effective date must be specific, cannot be put the date this document is filed by the Florida I Dated Dated	of filing:

Page 3 of 3

Filing Fee: \$25.00

15 JAN 16 AM 8: 29
JACKETARY OF STATE
TALLAHASSEE, FLORIO