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COVER LETTER

TO: Registration Section
Division of Corporations

AUTO CARRIER GROUP LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KIMBERLY DURHAM

Name of Person

CARRIER SERVICE INC

Firm/Company

20915 NW 2ND AVE

Address

MIAMI FL 33169

City/State and Zip Code

kdurham@carrierservice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIMBERLY DURHAM

305,652-9990

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

■\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 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**

AUTO CARRIER GROUP 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 Liab Florida document number L13000029395	ility Company v	were filed on <u>02/26/20</u>	13	and	assign	ed
This amendment is submitted to amend the following	ing:					
A. If amending name, enter the new name of the	<u>ie limited liabil</u>	ity company here:				
The new name must be distinguishable and end with the "L.L.C."	he words "Limite	ed Liability Company," the	e designation "I	LC" or t	the abbr	eviation
Enter new principal offices address, if applicable	le:			<u> </u>	_2_	·
(Principal office address MUST BE A STREET	<u>ADDRESS)</u>					
						BZ% Hees
Enter new mailing address, if applicable:		PO BOX 670064		SET OF	¥ +	Crearings
(Mailing address MAY BE A POST OFFICE BOX)		CORAL SPRINGS	, FL 33067	Fist Off	75	1,000
				<u> </u>	4	
B. If amending the registered agent and/or registered agent and/or the new registered offic			ords, <u>enter t</u>	he nam	<u>ie_of_t</u>	<u>he nev</u>
Name of New Registered Agent:	ASHLEY L T	TUCKER				
New Registered Office Address:	3800 NW 78	TH TERRACE				
TVEY REGISTERE OF TRAINESS.	· 	Enter Flo	rida street ada	ress		
	CORAL SPE	RINGS	_, Florida <u>33</u>	3065		
		City	_,	Zip (Code	
New Registered Agent's Signature, if changing Reg	<u>zistered Agent:</u>					

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.

Page 1 of 3

TChanging 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
MGRM	ASHLEY L TUCKER	3800 NW 78TH TERRACE Add
		CORAL SPRINGS, FL 33065
MGRM	NORMAN P PALMER	3800 NW 78TH TERRACE
		CORAL SPRINGS, FL 33065 Remove
MGR	NORMAN P PALMER	3800 NW 78TH TERRACE Add
		CORAL SPRINGS, FL 33065
		2013 Had All All Assets Fig. 10:
		Add Remove
		Remove

	he above change of MGRM Norman P Palmer				
is changing to Mo	is changing to MGR instead. So he is only changing his title				
from MGRM to N	MGR				
February 27	2013				
ated Pebluary 21	. 2010				
\bigcirc	ohle Koladucu				
•	nature of a member or authorized representative of a member				
Ashley L Tucke					
	Typed or printed name of signee				
	Page 3 of 3				

Filing Fee: \$25.00

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