## L/3000043510

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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K.SALY EXAMINER FEB 25

## **COVER LETTER**

TO: Registration S Division of Co	
Just Parts, SUBJECT:	,LLC
	Name of Limited Liability Company
the enclosed Articles of	of Amendment and fee(s) are submitted for filing.
	pondence concerning this matter to the following:
•	Carlos Garcia
	Name of Person
	Firm/Company
	4401 NW 87 Avenue, Unit 612
	Address
	Doral, FL 33178
	City/State and Zip Code carlosg@ifcglobalparts.com
	E-mail address: (to be used for future annual report notification)
For further information	concerning this matter, please call:
Carlos Garcia	at (305) 898 · 4647
Name	of Person Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  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**



Just Parts, 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 Florida document number $\frac{L13000043510}{L13000043510}$ .	were filed on March 22, 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	sility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4401 NW 87 Avenue, Unit 612
(Principal office address MUST BE A STREET ADDRESS)	Doral, FL 33178
Enter new mailing address, if applicable:	4401 NW 87 Avenue, Unit 612
(Mailing address MAY BE A POST OFFICE BOX)	Doral, FL 33178
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:  New Registered Office Address:	ffice address on our records, enter the name of the new e:  Enter Florida street address , Florida
· .	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 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.

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>	Name	Address	Type of Action
MGR Magdelena Sanchez		- 11022 NW 59 Street	☐ Add
		Miami, FL 33178	■ Remove
,			☐ Change
MGR	Carlos Garcia	4401 NW 87 Avenue, Unit 612	
	,	Doral, FL 33178	□ Remove
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Effective date, if other than fan effective date is listed, the date Note: If the date inserted in the document's effective date on the	e must be specific and cois block does not me	annot be prior to da et the applicable	te of filing or more tha	n 90 days after filing.	Pursuant to 605.0207 (3) Pursuant to 605.0207
e record specifies a deia The 90th day after the		ite, but not an	effective time,	at 12:01 a.m.	on the earlier of:
February		2016			
	1	<i>H</i> .			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00