1130000084311

(Requestor's Name)	
(Address)	700272341307
(Address)	, 002, 201100,
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	05/04/1501010021 **30.00
(Document Number)	
Certified Copies Certificates of Status	EFFECTIVE DATE
Special Instructions to Filing Officer:	
	12: 20 LORIDA

Office Use Only

MAY - 7 2015 AMARIA d

COVER LETTER

CITIO TO CYP.	of registered agent			
	Name of Limited Liability Company			
Γhe enclosed Articles	of Amendment and fee(s) are submitted for filing.			
Please return all corre	espondence concerning this matter to the following:			
	•			
	Mark Brannan			
	Name of Person			
	Complete Auto Sales LLC,			
	Firm/Company			
	980 E Hathtaway Ave			
	Address			
	Bronson FL, 32621			
	City/State and Zip Code			
	mb297911@yahoo.com			
	E-mail address: (to be used for future annual report notification)			
For further information	on concerning this matter, please call:			
Mark Brannan	352 486-1975			
Nan	at (

MAILING ADDRESS:

\$30.00 Filing Fee &

Certificate of Status

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certificate of Status & Certified Copy

(additional copy is enclosed)

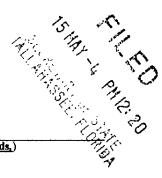
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

■ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Complete Auto Sales 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 were filed on $\frac{06/11/2013}{1}$ and assigned Florida document number L13000084311 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Jeremiah Polk Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

f Changing Registered Agent, Signature of New Registered Agent

Florida

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

Title	<u>Name</u>	Address	Type of Action
MGMR	Mark Brannan		□ Add
		11290 se 30th st Morriston FL, 326	■ Remove
			☐ Change
AMBR	Mark Brannan		
		11290 SE 30th st Morriston fl, 3266	Remove
			☐ Change
MGMR	Jeremiah Polk	980 E Hathaway Ave Bronson FL,	
			□ Remove
			☐ Change
			Add
			☐ Remove
		**************************************	☐ Change
	**************************************	***	□ Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			Change

Effective date, if other than the date of filing: 05/06/2015 (optional) an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.6 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed locument's effective date on the Department of State's records. The 90th day after the record is filed. Signature of a member or authorized-regresentative of a member		
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Signature of a member or authorized representative of a member		1000
		> Signature of a member of authorized representative of a member
		Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00