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J. SAULSBERRY EXAMINER

OCT 9 2013

COVER LETTER

Registration Section Division of Corporations

CARZ AND COMPANY AUTO SALES 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:

Jose F. Crispin Name of Person Carz and Company Auto Sales LLC Firm/Company 4029 Hammock Place Address Mulberry, FL 33860 City/State and Zip Code jcfrank13s@yahoo.com

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

For further information concerning this matter, please call:

Jose Frankie Crispin

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, 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

CARZ AND COMPANY 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 Compa	any were filed on August 19, 2013	and assigned
Florida document number L13000117352		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and end with the words "L.L.C."	imited Liability Company," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		27
(Principal office address MUST BE A STREET ADDRESS	2	====
	words - words - with	9
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		ع نیج
		<u> 58 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5</u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l	office address on our records, <u>en</u> h <u>ere</u> :	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
	, Florid	
	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Margarita Crispin	4029 Hammock Place	Add
		Mulberry, FL 33860	Remove
			Add
			Remove
			Add
			Remove
		· -	
			Add
		<u> </u>	Remove 20
			300
		<u></u>	Remove
			17
		·	Add
		· 	Remove

If amending any other inf	formation, enter change(s) here: (Attach additional sheets, if necessary.)
	·
October 4	
	Note & Com
	Signature of a member or authorized representative of a member
	Jose F. Crispin Typed or printed name of signee
	Page 2 of 2

Filing Fee: \$25.00

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