

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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C AMND/RESTATE/CORRECT OR M/MG RESIGN RCM AUTO LLC

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COVER LETTER

. TO: Registration Section
Division of Corporations

RCM AUTO 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:

ROSEMARY CARDOSO DE MORAIS

Name of Person

RCM AUTO LLC

Firm/Company

6 B PLEASANT LN

Address

PALM COAST, FL 32164

City/State and Zip Code

INFO@ABKCORP.COM

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

For further information concerning this matter, please call:

ROSEMARY CARDOSO DE MORAIS

407 898-1757

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status O\$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
Tallahassec, FL 32301

HN 3000 269 1173

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF.

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RCM AUTO 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 10/08/2013 and assigned Florida document number L13000142199

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BEA'Z EXPRESS LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6 A PLEASANT LN

PALM COAST, FL 32164

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:

Name of New Registered Agent:

VLAFFISON HENRIQUE PEREIRA

New Registered Office Address:

6 A PLEASANT LN

Enter Florida street address

PALM COAST

Florida 32164

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 Changing Resistered Agent, Signature of New Recistered Agent

Page 1 of 3

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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 Title : <u>Address</u> Name Type of Action **6 B PLEASANT LN** MRGM: ROSEMARY CARDOSO DE MORAIS PALM COAST, FL 32164 6 A PLEASANT LN **MGRM** VLAFFISON HENRIQUE PEREIRA PALM COAST, FL 32164

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