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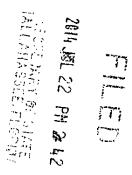
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	JUL 2 9 2016	,
	A. LUNT	!

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KAYANA HOLDINGS 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:
LOREN WOODS Name of Person
Firm/Company
3501 BESSIE COLEMAN BLUD # 27627
TAMPA FL 33622 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: LOREN WOODS at (480) 516 6343 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) □ \$25.00 Filing Fee & □ \$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

KAYANA HOLDINGS

(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company were filed on $oldsymbol{\Lambda}$	Duember 06 000 and assigned	ţ
Florida document number <u>L13 PPV 165 334</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company he	<u>:re</u> ;	
ON THE GO AUTO LLC		
The new name must be distinguishable and end with the words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."	**
Enter new principal offices address, if applicable:	10 . (20)	
(Principal office address MUST BE A STREET ADDRESS)	2: 66	
	7.7	
	1976	——
		1 1 -24',
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 registered agent and/or the new registered office address here: Name of New Registered Agent:	our records, enter the name of th	he n
New Registered Office Address;		
Enter Flor	rida street address	
	73. 1.	

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

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			□ Remove
			□ Demove
			No. 1
			Remove
			□ Add
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			□ Remove

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Page 3 of 3

Filing Fee: \$25.00