# 117000 165561

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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J. Shivers JAN 2 9 2013

## **COVER LETTER**

TO:	Registration Sec Division of Corp			
CIID	Plush	Motorworx, L	LC	
SUBJ	ECT: 1 1001		ited Liability Company	
The e	nclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspoi	ndence concerning this matter	to the following:	
		Howard Mar	·kowitz	
			Name of Person	
		Plush Motor	worx, LLC	
			Firm/Company	
		2070 C Tige	rtail Blvd Bldg 2	
			Address	<u>-</u>
		Dania Beacl	n, FL 33004	
			City/State and Zip Code	
		PlushMotorworx(	@gmail.com to be used for future annual report notific	ontion)
For fi	urther information co	oncerning this matter, please co		cations
Н	ward Ma	rkowitz	<sub>4</sub> ,561,246-33	396
	Name of	Person	^*` \/	Telephone Number
Enclo	sed is a check for th	e following amount:		
<b>■</b> \$:	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

Plush Motorworx, LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L13000165501	were filed on 11/25/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or the	abhreviation "L.L.C."
Enter new principal offices address, if applicable:	2070 C Tigertail Blvd Bldg 2	
Principal office address MUST BE A STREET ADDRESS)	Dania Beach, FL 33004	
		**************************************
Enter new mailing address, if applicable:	2070 C Tigertail Blvd Bldg 2	
Mailing address MAY BE A POST OFFICE BOX)	Dania Beach, FL 33004	Par Gi
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:	ffice address on our records, enter	the name of the
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zin Coda

#### 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 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 = Manager

<u>Title</u>	<u>Name</u>	Address Type of A
AMBR	Ashley Ferguson	2070 C Tigertail Blvd Bldg 2
		Dania Beach, FL 33004
		□ Add
		Remov
		The same of the sa
		Rĕmove
		Add
		□ Remove
		Remove
		□ Remove

.' If amending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of fili (The effective date must be specific, cannot be prior to the date this document is filed by the Florida Departm	ing: (optional) date of receipt or filed date and cannot be more than 90 days after nent of State)
Dated January 21	
26	
· · · · · · · · · · · · · · · · · · ·	a member or authorized representative of a member
Howard Markowitz	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00