Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000240201 3)))



H180002402013ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Ta:		•	
	Division of Cor	rporations	
,		: (850)617-6383	•
From:			
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number		
	Phone	: (305)552-5973	
	fax Number	: (305)675-5944	
**Ent	er the email addr annual report ma	ress for this business entity to be used for future illings. Enter only one email address please.**	
	Email Address:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ABC AUTO TRADE USA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

AUG 1 7 2018

Electronic Filing Menu

Corporate Filing Menu

Help

S. PRATHER

CONTROL OF THE PARTY OF THE PAR

3052201440

## H18000240201

6

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ·OF

	ABC AUTO TRADE USA, LLC	ે દુધ
( <u>Name of the Lli</u>	nited 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 12	/31/2013 and assigned
Florida document number L13000178387		and assigned
This amendment is submitted to amend the fo	ollowing:	5
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the de	esignation "LLC" or the abbreviation "L.L.C."
ater new principal offices address, if appl		
Principal office address MUST BE A STRE		
		<u> </u>
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	E BOX)	
If amending the registered agent and	d/or registered office address on	our records, enter the name of the
rgistered agent and/or the new registered	office address here:	
	<b></b>	
Name of New Registered Agent:	FERNADO CABRAL	
New Registered Office Address:	10304 NW 9TH ST CIRCLE APT	104
<del></del>	Enter Floria	da street address
	MIAMI	, Florida 33172
	City	Zip Code

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.

Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = M $AMBR = A$	Isnager Authorized Member	H180	000240201	
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action	
			☐ R¢move	
			Change	
AMBR	FERNANDO CABRAL	10304 NW 9TH ST CIRCLE APT	Add	
		MIAMI, FL. 33172	Remove	
		<del></del>	☐ Change	
AMBR	SABRINA MATOS	10304 NW 9TH ST CIRCLE APT	Add	
			C Remove	
			□ Change	
~				
			C Remove	
			Change	
<u>.</u>				
			Remove	
			☐ Change	
			🗖 Add	
			☐ Remove	
			Change	

	-	· <del>- =</del>					Hi	80	00	2402
<del></del>				<u> </u>		-			<u>.</u> ,	
			<del></del> -		<del></del>					
			<del></del> -			·				
	<del></del>									<del></del>
·					_					
				·						
								~-		<del></del>
	<b>-</b>			<del></del>				<u> </u>		
						<u>,                                     </u>				
<u></u>	<u></u>			_						
<del></del> -		<del></del>								<del></del>
<del></del>										
		<u>.</u> .	<u> </u>							
										<del></del>
<del></del>					•	·		<del></del>	_	
effective date	દ્યું if other than the d	ate of filin	ng:	:			(on	tional	`	
TOTOL TI GIC GI	e, if other than the date is listed, the date must be ate inserted in this bloc fective date on the Dep	v acces iinti	meet me at	IDITERUIC SU	of filing or mo dutory filing	re than 90 requiren	days of ents, ti	ter filioq his dete	, g.) Pursua will no	ant to 605.020 of be listed a
e rocard on	pacifier a dalayod .		V-4		er.					
The 90th o	pecifies a delayed of day after the recor	d is filed.	. \	i not an e	irective ti	me, at	12:01	a،m. نې		æ <b>e</b> reamer o
_	00/00		\20	W (7						<u> </u>
Dated X	08/09	\_	, ,						•	AUS T
	<b>x</b> .	.,								ਰਾ
	~	11								<del> )</del>
	Si	grature of a	member or	authorized re	presentative (	of a member	Er			· ·-
	Si	gnature of a		authorized re ILSON A A		) f a memb	er			·ω

Page 3 of 3

Filing Fee: \$25.00