

OCT/27/2015 10:18 PM
10/27/2015

FAX No.

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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15 OCT 27 AM 7:42
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VALUE AUTO GROUP LLC**

Certificate of Status	0
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OCT 28 2015
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Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VALUE AUTO GROUP 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 05/09/2014 and assigned Florida document number L14000075534.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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 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

OCT/27/2015/TUE 01:19 PM

FAX No.

P. 003

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

AMBR	Angie Alvarez Gandarilla	103300 OVERSEAS HWY	<input checked="" type="checkbox"/> Add
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		KEY LARGO, FL 33037	<input type="checkbox"/> Remove
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15 OCT 27 AM 7:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P. 004

[illegible]

15 OCT 27 AM
JONES LANE OF
TALLAHASSEE, FL

15 OCT 27 AM 7:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature of a member or authorized representative of a member

JOHN A. GANDARYLLA

Typed or printed name of signer