Division of Corp rat

Florida Department of State

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WEST BRICKELL 8TH STREET INVESTORS, LLC

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September 18, 2015

FLORIDA DEPARTMENT OF STATE

WEST BRICKELL STE STREET INVESTORS, LLC
4036 MALAGA AVENUE
MIAMI, FL 33133US

SUBJECT: WEST BRICKELL STH STREET INVESTORS, LLC

REF: L14000097752

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L02000020585 CAR WASE, L.L.C..

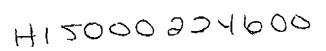
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Stacey M Mason Regulatory Specialist II FAX Aud. #: H15000224600 Letter Number: 315A00019702

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P.O BOX 6327 - Tallahassee, Florida 32314





ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the I Smited Lie (A Flo	ability Company by it now appears o	
	anda Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liabilli	ty Company were filed on 06-18	-14 and assigned
Florida document number L14000097752	,, op.,,p.,,	
Florida document number	•	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here	:
THE CARWASH, LLC		
The new using must be distinguishable and contain the words "	'Limited Liability Company," the design	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL		
Tripoper office andreas in OST DE TENESCOST		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Manuag and the A POST OF TICE DOX	<u> </u>	
Name of New Registered Agent: New Registered Office Address:		
	Enter Florida	street address
		, Florida
	Enter Florida Clty	
New Registered Office Address: New Registered Agent's Signature, if changing Registered	City	, Florida
New Registered Office Address:	City ered Agent: ent and agree to act in this cap d complete performance of my d agent us provided for in Cha tered office address, I hereby o	, Florida Zip Code zip Code pacity. I further agree to comply with the duties, and I am familiar with and upter 605, F.S. Or, if this document is confirm that the limited liability
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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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			□ Remove
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