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COVER LETTER

TO:	Registration Sec Division of Corp						
erin ti		PARTS SERVICES, LLC					
SUBJI	r.C1:	Name of Lim	ited Liability Company				
		Amendment and fee(s) are sub					
		PIRELA OCANDO FERI					
Name of Person							
J. F AUTO PARTS SERVICE, LLC							
Firm Company							
7300 W FLAGLER ST							
Address							
		MIAMI. FL 33144					
		SHOP.2567@MEINEKE.	City/State and Zip Code NET				
		E-mail address: (to be used for future annual report notifi	cation)			
For fu	rther information co	oncerning this matter, please co	all:				
PIRE	LA OCANDO FEF	RNANDO	786 534 4931				
	Name of	f Person	at ()	Telephone Number			
Enclos	sed is a check for th	ne following amount:					
S \$2	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

J. F AUTO PARTS SERVICES, LLC				
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our Liability Company)	records.)		
The Articles of Organization for this Limited Liability Company Florida document number L14000102838	were filed on 06/26/14	and	l assig	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation	n "LLC" or the abbreviation	n "ll	<u>c."</u>
Enter new principal offices address, if applicable:			_	
(Principal office address MUST BE A STREET ADDRESS)			63	18140 290
Enter new mailing address, if applicable:			JI6	35 m 35 m 22 m
(Mailing address MAY BE A POST OFFICE BOX)			P¥ -:	
	CC"		2	·····································
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		ecoros, <u>enter the ha</u>	<u>me oi</u>	the new
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street	address		
		, Florida		
	City	Zip C	ode	

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 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>	Type of Action
MGR	PERALTA, EDGAR GABRIEL	7300 W FLAGLER ST	□ Add
		MIAMI, FL 33144	■ Remove
			☐ Change
MGR	SIERVO, LUCIANO ANDRES	7300 W FLAGLER ST	■ Add
		MIAMI, FL 33144	□ Remove
			Change
			☐ Remove
			Change
			Remove
			Change
			Add
			☐ Remove
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Affective date, if other the	an the date of fili	ng:		(option	nal)
<u>Note:</u> If the date inserted in	this block does not	meet the applica	to date of filing or m ible statutory filin	ore than 90 days after to g requirements, this o	date will not be listed
locument's effective date of	a the Department of	State's records.			
e record specifies a d	elayed effective	date, but not	an effective t	ime, at 12:01 a.	m. on the earlier
The 90th day after th					
JULY 02 Dated		2018			
Jated		- ·			

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Typed or printed name of signee

Filing Fee: \$25.00