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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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D. BRUCE NOV 30 2016

COVER LETTER

Div	ision of Corpo	orations						
SUBJECT:	Oak Leaf II, I	LC						
SUBJECT:		Name of Limi	ted Liability Company					
The enclosed	Articles of A	mendment and fee(s) are subt	nitted for filing.					
Please return	all correspond	dence concerning this matter t	to the following:					
		Michael Elion						
			Name of Person					
		Mart Management, LLC						
			Fam/Company					
	2090 Palm Beach Lakes Blvd., STE 701							
			Address					
		West Palm Beach, FL 3340	99					
			City/State and Zip Code					
		m.elion@martmanagement.c						
		E-mail address (t	o be used for future annual report notificat	ion) $\Xi_{\mathcal{S}_{2}}$	2			
For further in	nformation cor	ncerning this matter, please ca	11:	LA LA	2016 N	~		
Michael Elic			561 684-2095 at ()	HASS	NOV 26	FILED		
	Name of I	erson	Area Code Daytime Te	lephone Num r	.u.	III		
				FL0	⊕	D		
Enclosed is a	a check for the	following amount:		ATE RIDA	. 05			
■ \$25,00 F	filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60,00 Filing Certificate o Certified Co (additional cop	Fee. Status py			

MAILING ADDRESS:

TO:

Registration Section

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

Oak Leaf II, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Adulity Company)	********
The Articles of Organization for this Limited Liability Company Florida document number 1.14000112993		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Car Wash Properties II, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity 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 of	fice address on our records, <u>e</u>	nterthe same of the ne
registered agent and/or the new registered office address here	:	V 28
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	tr Ob
	·	
	, Florid	la
New Registered Agent's Signature, if changing Registered Agent:	υn,•	zą orac
I hereby accept the appointment as registered agent and agre	e to act in this capacity. I furthe	r agree to comply with th

If Changing Registered Agent, Signature of New Registered Agent

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 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 _□ Add □ Remove _□ Change □ Add _□ Remove _□ Change □ Add ☐ Remove Change 28 Remov Change _ Add ☐ Remove ☐ Change _ 🗆 Add □ Remove

_□ Change

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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00