L14000122672

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAIL	
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO:	Registration Se Division of Cor						
SUBJE		vers Association LLC					
SUDJE	CI:	Name of Lim	ited Liability Company				
		Amendment and fee(s) are sub	_				
		Donna Meyerson					
			Name of Person				
		Florida Drivers Associati	ion LLC				
			Firm/Company				
		1093 SE Saint Lucie Blv	rd				
			Address				
		Stuart, FL 34996					
		City/State and Zip Code donna@123driving.com					
		-	to be used for future annual report notifi	ication)			
For furt	her information c	oncerning this matter, please ca	all:				
Donna	Meyerson		772 486-2214 at ()				
	Name o	f Person	Area Code Daytime	Telephone Number			
Enclose	d is a check for th	ne following amount:					
\$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

Florida Drivers Association LLC			
(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Con	appears on our records.) ipany)	
The Articles of Organization for this Limited I	Liability Company were filed	on 08/05/2014 a	nd assigned
Florida document number L14000122672	,		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability comp	anv here:	
The new name must be distinguishable and contain the	words "Limited Liability Company	y," the designation "LLC" or the abbrevial	DIVIS
Enter new principal offices address, if appli			JUL OF F
Principal office address MUST BE A STRE	ET ADDRESS)		- PX
			5 2 2 2 3 3 3 3 3 3 3 3 3 3
Enter new mailing address, if applicable:			31 ONS
Mailing address MAY BE A POST OFFICE	<u></u>		
3. If amending the registered agent and registered agent and/or the new registered of		ess on our records, enter the n	name of the ne
Name of New Registered Agent:	Donna Meyerson		
New Registered Office Address:	2740 SW Martin Downs	Blvd., #223	
The Hagington Office Hadress.	En	nter Florida street address	
	Palm City	Florida <u>34990</u>	
	City	Zip	Corde

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>	Address	Type of Action
MGR	Donna Meyerson	2740 SW Martin Downs Blvd	Add
		#223	Remove
		Palm City, FL 34990	Change
			Remove
			Change
			Add
			Remove
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			Add
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ffective date, if other tha	n the date of	07/01/2 filing:	2018		(optional)		
an effective date is listed, the da lote: If the date inserted in (ite must be speci	fic and cannot be			0 days after filing.)		
ocument's effective date on				n's minig require	ments, this date v	viii not de ns	icu as
e record specifies a de The 90th day after the			not an effe	ctive time, a	: 12:01 a.m. c	n the earl	ier o
July 1		2018					
ated		<u> </u>	<u> </u>				
				sentative of a men			

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Typed or printed name of signee

Filing Fee: \$25.00