L14000187747

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASF-AUTO STARTS FLOR	•		
(Name of the Limiter	1 Liability Compan A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Lia Florida document number L14000187343	bility Company v	were filed on 12/08/2014	_ and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of t	the limited liabil	lity company here:	
ASF- AUTO STARS F			
The new name must be distinguishable and end with the w	ords "Limited Liabil	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		11325 CENTER LAKE DRIVE	
		UNIT 2106	
		WINDERMERE, FL 34786	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11325 CENTER LAKE DRIVE UNIT 2106	
		WINDERMERE, FL 34786	
B. If amending the registered agent and/or registered agent and/or the new registered offi		fice address on our records, enter → the	e name of the new
Name of New Registered Agent:	SUZELI M. F	FONSECA TRILHA	20 seems
New Registered Office Address:	11325 CENT	FER LAKE DRIVE - UNIT 2106	
		Enter Florida street address	
	WINDERME	RE , Florida	<u> </u>
			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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SUZELI M. FONSECATRILHA	8091 MARITIME FLAG STREET	
		UNIT 9303	Remove
		WINDERMERE, FL 34786	
MGR	SUZELI M. FONSECA TR IJH A	11325 CENTER LAKE DRIVE	■ Add
		UNIT 2106	□ Remove
		WINDERMERE, FL 34786	
			Add
			□ Remove
			14 REC 2 Remove, 14 REC 2 Remove, 15 Remove,
			AHASSEE, FLDRIDA
			Remove
			Add
			□ Remove

in amending any other information,	enter change(s) nere: (Allach t	iaamonai sneeis, ij necessary.)
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Effective date, if other than the date (The effective date must be specific, cannot be put the date this document is filed by the Florida D	of filing: rior to date of receipt or filed date and clepartment of State)	(optional) annot be more than 90 days after
Dated DECEMBER 19		
\times		
~	ure of a member or authorized represe	ntative of a member
SUZELI M. FONSECA	TRILHA - MGR	
	Typed or printed name of sign	inee

Page 3 of 3

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SECRETARY OF SIAIL