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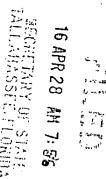
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APR 29 2016 J SHIVERS



April 13, 2016

ANJAN GHOSAL 481 SPRING LAKE DR MELBOURNE, FL 32940

SUBJECT: SH EXOTIC AUTO RENTALS LLC

Ref. Number: L14000188434

We have received your document for SH EXOTIC AUTO RENTALS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 116A00007650

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	SH	EXAC	MIC	AU10	RENTALS	uc.
DOCUMENT NUMBER:	<u> </u>	14000	3188	434		
The enclosed Articles of Amendment	and fee a	re submitte	ed for fil	ing.		
Please return all correspondence conce	rning this	s matter to	the follo	owing:		
	AN	JAN	64	OSAL		
	-	Na	me of C	ontact Perso	on	
	SH	EXAU	TIC	AUTO	RENTMS	uc
			Firm/ (Company		

ARTICLES OF AMENDMENT 'TO ' ARTICLES OF ORGANIZATION OF

SU EXOTIC AUTO RENTALS UC

(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>LIH 000 188</u> 4	ny were filed on 4H DEC 20.	14 and assigned
This amendment is submitted to amend the following:	,	
A. If amending name, enter the new name of the limited li CHES AV MEDIA AND The new name must be distinguishable and contain the words "Limited Lie	ENTERTAINMENT	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Same add (481 Spring u Mabourns	AKE DUE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same ade	dress
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		er the name of the new
Name of New Registered Agent:		728 A
New Registered Office Address:	Enter Florida street address	7.57.7.1
	, Florida,	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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The 90th	04/23	Signature	of a member or au	thorized representat	ive of a member	EFLORIA	· .

Page 3 of 3

Filing Fee: \$25.00