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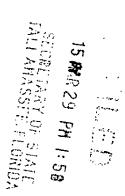
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THE LAW OFFICE OF JEFFREY M. JANEIRO, P.L.

100 TAMIAMI TRAIL N., SUITE 20 NAPLES, FLORIDA 34103 TEL. (239)-513-2324 FAX. (239)-513-9580 www.janeirolaw.com

Jeffrey M. Janeiro, J.D., LL.M. LL.M. in Taxation Member FL & PA Bar Managing Member

Lauren Canterna, J.D. Member of FL Bar

Daniel Fellhauer, J.D., of Counsel Member of VA & MI Bar

Articles of Incorporation Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: TAMIAMI AUTO MART, LLC

To Whom It May Concern:

Enclosed please find Articles of Amendment to Articles of Organization of TAMIAMI AUTO MART, LLC. a Florida Limited Liability Company, for recording. Also enclosed is a check made payable to your office in the amount of \$30.00.

This Article of Amendment to Organization is to add:

Angela L. Klein as a Member.

Once the document has been recorded, please return a Certificate of Status and Certified Copy to our office using the enclosed self address and stamped envelope.

Should have any questions please do not hesitate to call our office.

Sincerely,

auren C. Canterna, Esq.

Attorney-At-Law

Law Office of Jeffrey M. Janeiro, P.L.

Enclosures

Ronald Klein, J.D. of Counsel * Member of FL Bar

* Practice Limited to Commercial Litigation

Ty Mahaffey, J.D., of Counsel Member of OH Bar

COVER LETTER

TAMIAM SUBJECT:	I AUTO MART LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Jeffrey M. Janeiro, E	Esq.	
		Name of Person	
	Law office of Jeffrey	M. Janeiro	
		Firm/Company	
	3400 Tamiami Trail	N., Ste 203	
		Address	
	Naples, FL 34103		
		City/State and Zip Code	
	janeiro@jjlawyers.co	m to be used for future annual report notifi	
For further information co	oncerning this matter, please ca	·	(cation)
	meering mis matter, please er		
Jeffrey M. Janeiro		239 513-2324 at ()	- H
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	e 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)
	NG ADDRESS:	STREET/COURIE	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAMIAMI AÚTO MART LL		
(Name of the Limi	ted Liability Company as it now appears on our rec (A Florida Limited Liability Company)	ords.)
he rticles of Organization for this Limited L orida document number L15000013598	ciability Company were filed on 01/22/2015	5 and assigned
	······································	
his amendment is submitted to amend the foll	lowing:	
. If amending name, enter the new name of	of the limited liability company here:	
he new name must be distinguishable and end with the	e words "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
	cable:	
inter new principal offices address, if appli		· · · · · · · · · · · · · · · · · · ·
Enter new principal offices address, if appli <i>Principal office address MUST BE A STREI</i>		
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Principal office address MUST BE A STREE Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	ET ADDRESS) E BOX)	ords, enter the name of the
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Principal office address MUST BE A STREET Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and egistered agent and/or the new registered of Name of New Registered Agent:	ET ADDRESS) BOX) d/or registered office address on our reconffice address here: Jeffrey M. Janeiro	5
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and registered agent and/or the new registered of	ET ADDRESS) E BOX) d/or registered office address on our reconffice address here:	5 MR 29 PH
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and egistered agent and/or the new registered of New Registered Agent:	ET ADDRESS) d/or registered office address on our reconffice address here: Jeffrey M. Janeiro 3400 Tamiami Trail N., Ste. 203	5 MR 29 PH

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:

<u>Ítle</u>	<u>Name</u>	Address	Type of Action
MBR	Angela L. Klein	15650 S. Tamiami Trail	■ Add
	·	Fort Myers, FL 33908	□ Remove
			□ Add
			Remove
			□ Add
	,		□ Remove
)			15 3
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		·	Remove_
			IAIE ORIBA
			Remove
 			Add

Change title	OT:
Jáck T. Klei	n from MGMR to MGR
Michelle Lin	glet from MBR to AMBR
ive date if at	per than the date of filing:
	ner than the date of filing: (optional especific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
	her than the date of filing: (optional specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after a filed by the Florida Department of State)
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Page 3 of 3

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