L150000264607

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Se Division of Cor	ection ç rporations	
	sed Auto of Jacksonville LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	Melvin Mallety III	
	Name of Person	
	Mallety Used Auto of Jacksonville LLC	
	Name of Limited Liability Company d Articles of Amendment and fee(s) are submitted for filing. n all correspondence concerning this matter to the following: Melvin Mallety III Name of Person Mallety Used Auto of Jacksonville LLC Firm/Company 10210 Lem Turner Road Address Jacksonville, FL 32218 City/State and Zip Code melvinmallety904@gmail.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call:	
	10210 Lem Turner Road	2015 M SECR FALLA
	Address	AR ROV
	Jacksonville, FL 32218	
	City/State and Zip Code	
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For further information of	concerning this matter, please call:	
Melvin Mallety III	at ()	
Name	of Person Area Code Daytime Tele	phone Number
Enclosed is a check for t	the following amount:	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	S60.00 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

ed on 02/11/2015	_and assigned				
The Articles of Organization for this Limited Liability Company were filed on 02/11/2015 Florida document number L15000026467					
npany here:					
any," the designation "LLC" or the abbre	viation "L.L.C."				
Lem Turner Road -					
onville, Florida 32218	- 				
Merrill Road	-5				
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onville, Florida 32277					
a	Lem Turner Road nville, Florida 32218 Merrill Road 16				

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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			□ Change
		-	□ Add
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ffective date, if other than the date of filing: (optional) an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207						ble statutor	y filing require	ments, this	date will	not be lis	sted as 1
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Page 3 of 3

Filing Fee: \$25.00