## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000154399 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070000160 : (803)494-3124 : (305)675-2811 Fax Number

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Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **NEIL'S AUTO SALES LLC**

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JUN 24 2015

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT H15000154399 3 TO ARTICLES OF ORGANIZATION OF

	NEIL'S AUTO SALES LL	· ·		
(Name of the Limited I	lability Company as it now appear of the limited Liability Company)	on our records.		
The Articles of Organization for this Limited Liabi Florida document number	lity Company were filed on	03/18/2015	and assigned	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	c limited liability company her	r <u>e</u> :		
The new name must be distinguishable and contain the words	"Limited Liability Company," the de	signation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO				
Name of New Registered Agent:  New Registered Office Address:				
	Enter Florida street address			
-	City	, Florida _	Ztp Code	
New Registered Agent's Signature, if changing Regi	•		Z.p Coas	
I hereby accept the appointment as registered approvisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the region company has been notified in writing of this change	gent and agree to act in this c and complete performance of r ed agent as provided for in C stered office address, I hereby	ny duties, and I am hapter 605, F.S. Oi	familiar with and if this document is mitted liderally OF C MILECRETARY 23 AND 23	
	If Changing Registered Age	int, Signature of New R	eristered Alema 32	
	Page 1 of 3		RECORD STATE STATE STATE 54399 3	
		H1500016	54399 3 💢 👼	

MGR = Manager

H15000154399 3
If smending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR - Authorized Member <u>Title</u> Name Address Type of Action AMBR O'NEIL WILLIAMS 1868 NW 38TH AVE □ Add LAUDERHILL, FL 33311 Remove \_□ Change \_□ Add \_□ Remove \_ Change ☐ Change \_□ Add □ Remove □ Change \_□ Add 🗖 Remove\_

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Effective date,	if other than the date of filing:		(optiona	<b>J</b> )	f 4047 m)/
Note: If the dat	o is listed, the date must be specific and earns te inserted in this block does not meet the active date on the Department of State's	he applicable statutory filing:	e man 90 days aner mo requirements, this da	te will not be list	o.0207 (3)( ed as the
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the record spe ) The 90th d	ecifies a delayed effective date, ay after the record is filed.	but not an effective tir	ne, at 12:01 a.m	i, on the earil	er of:
Detail	JUNE 18TH	2015			
Dated	1 (1)				01/2
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