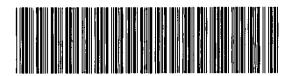
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K. SALY EXAMINER

MAY 27 2015

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	HOLLANI	D LEASING USA, LLC		
30202011		Name of Lim	ited Liability Company	
The1	1 A-wi-1 £	A a d a d. Car(a) a a b.		
i ne enciosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		ALEX KURKIN		
			Name of Person	
		KURKIN BRANDES LL	ρ	
			Firm/Company	
		18851 NE 29th AVENUE	, SUITE 303	
		-	Address	
		AVENTURA, FL 33180		
			City/State and Zip Code	
		akurkin@kb-attorneys.com		
		E-mail address: (to be used for future annual report notifi	ication)
For further in	nformation c	oncerning this matter, please ca	all:	
STACY SA	NTIAGO		305 929-8503	
	Name o	f Person		Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling 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)

MAILING ADDRESS:

TO:

Registration Section

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**



HOLAND LEASING USA, LLC

(A Florida Lim	ited Liability Company)	LAMASSEE FLORIE
The Articles of Organization for this Limited Liability Comp	pany were filed on March 31, 2015	and assigned
Florida document number L15000056968		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited l	Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES:	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	· ·	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	Zip Code

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DAVID IRVING	2345 Okeechobee 131vd. West Palm Beach FL 33409	¹■ Add
			□ Remove
			Change
			□ Remove
			Change
			Add Seemova 7 PH 2:59
			_OChiange # 2:59
			Remove
			Change
			_□ Add
			_□ Remove
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			☐ Change

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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this ble document's effective date on the De	be specific and extnot be prior tock does not meet the applic	able statutory filing rec	(optional) nan 90 days after filing.) Pursu puirements, this date will n	ans to 605,0207 (3) at be listed as the	(b) :
the record specifies a delayed) The 90th day after the reco	effective date, but no ord is filed.	t an effective time	, at 12:01 a.m. on th	e earlier of:	
Dated MAY 27	. 2015		•		
	- 4	AL			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00