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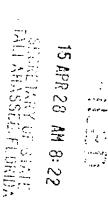
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COVER LETTER

то:	Registration Sectorial Division of Corp.		*	ę.
SUBJE		ARS UNLIMITED LLC		
SUDJE	CI:	Name of Lim	ited Liability Company	
The end	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	dence concerning this matter	to the following:	
		AIMAR GOROSITO		
			Name of Person	
		MOTORCARS UNL	IMITED LLC	
			Firm/Company	
		4933 LEEWARD LN		
			Address	
		FORT LAUDERDAL	E, FL 33312	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notifica	ation)
For fur	ther information co	ncerning this matter, please c	all:	
ENEI	DA V. CASTIL	LO	954 6817542	
	Name of	Person	Area Code Daytime T	elephone Number
Enclose	ed is a check for the	following amount:		
\$25	5.00 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)

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

MOTORCARS UNLIMITED LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on APRIL 16, 2015 and assigned Florida document number <u>L1</u>5000066965 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City

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.

New Registered Agent's Signature, if changing Registered Agent:

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
P	AIMAR GOROSITO	4933 LEEWARD LN	Add
		FORT LAUDERDALE, FL 33312	Remove
VP	DANIEL R. SILVA	7400 STIRLING RD, APT 1510	
		HOLLYWOOD, FL 33024	Remove
MGR	AIMAR GOROSITO	4933 LEEWARD LN	■ Add
		FORT LAUDERDALE, FL 33312	□ Remove
MGR	DANIEL R. SILVA	7400 STIRLING RD, APT 1510	≥ c ■ Add
		HOLLYWOOD, FL 33024	5 AP Remove 28 AM
			Drawld Remove
			
			□ Remove

To aking days if all and have the	he date of filing: (optional
e effective date must be specific, ca	annot be prior to date of receipt or filed date and cannot be more than 90 days after
he effective date must be specific, or the date this document is filed by the APRIL 22	annot be prior to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the	annot be prior to date of receipt or filed date and cannot be more than 90 days after Florida Department of State)
The effective date must be specific, or the date this document is filed by the APRIL 22	annot be prior to date of receipt or filed date and cannot be more than 90 days after Florida Department of State)
he effective date must be specific, or he date this document is filed by the APRIL 22	Annot be prior to date of receipt or filed date and cannot be more than 90 days after Florida Department of State) , 2015 Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

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