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## **COVER LETTER**

Division of Cor	rporations		
SUBJECT:	Arrogds At Name of Lim	SALES LL ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Felipe	Name of Person	
	Arroyo	S Auto SALe Firm/Company	LLC
	1078 SV	Address	
	Orange Cil	City/State and Zip Code	.3
	E-mail address: (t	to be used for future annual report noti	fication)
For further information c	concerning this matter, please ea	dl:	
Felipe Mame o	royo's Person	at ( <u>384</u> ) <u>846</u> Area Code Daytimo	- 7765 e Telephone Number
Enclosed is a check for the	ne 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)

MAILING ADDRESS:

**Registration Section** 

TO:

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

		rida street address , Florida	Zip (		· = :
		rida street address		7.3	:
registered agent and/or the new registered office address here  Name of New Registered Agent:				13	:
registered agent and/or the new registered office address here	:			1.3	
	;				-
	:		-	•	•
	fice address or	our records, <u>ent</u> e	er the na	me_of	the i
(Mailing address MAY BE A POST OFFICE BOX)					
Enter new mailing address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
Enter new principal offices address, if applicable:					
The new name must be distinguishable and contain the words "Limited Liabil	ty Company," the	designation "LLC" or the	abbreviatio	n "I.,I.,(	1 41 '- +
A. If amending name, enter the new name of the limited liabi	lity company h	<u>ere</u> :			
This amendment is submitted to amend the following:					
Florida document number <u>L 15000070352</u>					
The Articles of Organization for this Limited Liability Company	were filed on _	04/22/201	ane	l assig	ned
(Name of the Limited Liability Compa- (A Florida Limited L	iability Company)	rs an uur recorus.			

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, <u>enter the title, name, and address of each person\_being addor removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>A MBN</u>	Angel Ruiz	1060 Green wood put	
		Openia city FL32763	⊟ Remove
			☐ Change
			🗆 Add
			Remove
			🗆 Change
		<u> </u>	Remove
			Change
<del></del>			D Add
			□ Remove
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			Change

(If an el Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	Signature of a member of a member
	Signature of a member or authorized representative of a member
	5.11 A A. W.
	+/ 1, 0 - F4

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Filing Fee: \$25.00