15000094486

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2015 AUG 13 PM 2: 25
SEURETARY OF STATE
SEURETARY OF STATE

K.SALY EXAMINER AUG 142015

COVER LETTER

	gistration Sec vision of Corp			
		P USA LLC	1	
SUBJECT:	<u></u>	Name of Lim	ted Liability Company	
		Amendment and fee(s) are sub	•	
		ZEE DELGADO		
			Name of Person	AND ADDRESS OF THE PARTY OF THE
		AFFORDABLE LEGAL &	ACCOUNTING SERVICES	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		10300 SUNSET DRIVE B	LDG. 100 SUITE. 140	
			Address	
		MIAMI, FL 33173		
			City/State and Zip Code	
		INFO@AFFORD-LEGAL.		
For further		oncerning this matter, please ca	to be used for future annual report notificall: at ()Area Code Daytime	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	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)
	MAILI	ING ADDRESS:	STREET/COURIE	R ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2015 AUG 13 PM 2: 25
TALLAHASSEE. FLORIDA

AUTOSHOP USA 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 Li Florida document number L15000094486	ability Company w	vere filed on <u>05/15/20</u>	115	and assign	ned
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liabil	ty company here:			
The new name must be distinguishable and contain the we	ords "Limited Liability	y Company," the designa	tion "LLC" or the a	abbreviation "L.L.C	71 NA
Enter new principal offices address, if applica	able:		me		
(Principal office address MUST BE A STREE	T ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX)	Sa	me		
B. If amending the registered agent and/or the new registered of			records, enter	the name of	the new
Name of New Registered Agent:	TOMAS MANR	IQUE			
New Registered Office Address:		SAME Enter Florida str	eet address		
	<u></u>	Same	, Florida	Same. Zip Code	
		•*		-	

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

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: 2015 AUG 13 PM 2: 26 MGR = Manager AMBR = Authorized Member **Type of Action Address** <u>Title</u> Name VENTURINI, JOHNATHAN MGR _ Add Remove ☐ Change MGR MANRIQUE, JOSE G. ■ Add ☐ Remove ☐ Change MANRIQUE, TOMAS MGR **■** Add ☐ Remove □ Change □ Add _□ Remove □ Change □ Add _□ Remove ☐ Change □ Add □ Remove

□ Change

b. It amending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
	20.5
	2015 AUG 13 PM 2: 26
	FALLAHASSEE FLORIDA
	OSEE. FLORIDA
 	
	
(If an effective date is I <u>Note:</u> If the date in	other than the date of filing: 8 1 2015 (optional) isted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(be serted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the re date on the Department of State's records.
	ies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: after the record is filed.
Dated AVC	ust 07.2015
	Signature of a member of authorized representative of a member
	Tomas Manria 119

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Filing Fee: \$25.00