# L15000095045

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### **COVER LETTER**

**Division of Corporations** SUBJECT: FLORIDA EXPOCARS, LLC
Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: PEDRO E. RANGEL
Name of Person FLORIDA EXPO CARS, LLC 3355 BRIDLE PATH Lane Weston, Florida, 33331 Pedrovangel Olive. Com.

E-mail address: (t) be used for future annual report notification) For further information concerning this matter, please call: at (954) 859 447 Daytime Telephone Number Pedro Rangol Name of Person

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

#### **MAILING ADDRESS:**

\$30.00 Filing Fee &

Certificate of Status

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

TO:

**Registration Section** 

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

#### STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certified Copy (additional copy is enclosed)

Certificate of Status &

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

## ARTICLES OF AMENDMENT TO

**OF** 

ARTICLES OF ORGANIZATION

FILED

2015 DEC -7 AM 9: 36

<b>0.</b>	SEC	RETARY OF STARE
FLOVIDE EXPOCERS, LIC.	TALL	RETARY OF STATE AHASSEE, FLORIDA
(Name of the Limited Liability Company as it now appears on ou	r records.	)
(A Florida Limited Liability Company)		1

Florida document number <u>L \5 0000950</u>	45	, ,	•
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the li	• • •		or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS) DAVI	E FLORIDA	5th Street
Enter new mailing address, if applicable: (W/Q) (Mailing address MAY BE A POST OFFICE BOX)	pproude)3355	ton, Flori	Path Lane de, 33331
B. If amending the registered agent and/or registered agent and/or the new registered office a	ddress here: /		enter the name of the new
Name of New Registered Agent:	APLICZE	ole	
New Registered Office Address:			
	Ent	er Florida street address	
		, Flori	
•	City		Zip Code
Now Desistand Assetts Clauston (Calcultus Desista	B A 4		

#### 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:			<del></del>	
•				

MGR = Ma $AMBR = Au$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add
			Remove
			Change
			□ Add
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<del></del>			Add
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D. If amending any other information, enter change(s) here: (Attach additional sho	eeis, y necessary.)
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	36 36
Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing requir document's effective date on the Department of State's records.	(optional) 90 days after filing.) Pursuant to 605.0207 (3) rements, this date will not be listed as the
the record specifies a delayed effective date, but not an effective time, a ) The 90th day after the record is filed.	at 12:01 a.m. on the earlier of:
17/2	
Dated 17/01, 2015.	
Signature of a member or authorized representative of a men	mher
Pedro E. Rangel	
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00