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COVER LETTER

Division of C	n Section Corporations	
REAL D	DEAL AUTO #1, LLC	
SUBSECT.	Name of Limited Liability Company	
	of Amendment and fee(s) are submitted for filing.	
Please return all corres	spondence concerning this matter to the following:	
	ALEJANDRA MARQUEZ VILLA	
	Name of Person	
	AMV LEGAL GROUP P.A	
	Firm/Company	
	3325 HOLLYWOOD BLVD STE 401	
	Address	
	HOLLYWOOD FL 33021	
	City/State and Zip Code	
	ALE@AMVLEGALGROUP.COM E-mail address: (to be used for future annual report notification)	
For further information	on concerning this matter, please call:	
ALEJANDRA MARO	OUEZ VILLA 954 253-9695	
Nam	ne of Person Area Code Daytime Telephone Number	_
Enclosed is a check fo	or the following amount:	
■ \$25.00 Filing Fee	e ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fe Certificate of Status Certified Copy Certificate of \$ (additional copy is enclosed) Certified Copy (additional copy is	Status &

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

REAL DEAL AUTO #1, 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 $\frac{06/40/2015}{1}$ and assigned Florida document number L15000101166 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 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

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JUAN JOSE CASTILLO	3300 NE 191 ST., STE 1607	Add
,		AVENTURA, FL 33180	□ Remove
			Change
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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 n	optional)	to 605 020
Note: If the date inserted in this block does not meet the applicable statutory filing	ng requirements, this date will not	be listed as
document's effective date on the Department of State's records.		
ne record specifies a delayed effective date, but not an effective t	time, at 12:01 a.m. on the	earlier o
The 90th day after the record is filed.		
Dated MARCH 30 , 2018		

Typed or printed name of signce

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