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D. SCOTT JAN 1 0 2017

# **COVER LETTER**

Division of Corporations	
SUBJECT: MFCK AUTO Sales 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:	
Francique Fanfan  MFCK Auto Sales LLC  Firm/Company  8885 103rd Steet	
Address  Address  Address  City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  F-mail address: (to be used for future annual report notification)	7
For further information concerning this matter, please call:	-
Francique Faufan at 904 437-8910  Name of Person Area Code Daytime Telephone Number  Enclosed is a check for the following amount:	コン
S25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee,	
Certificate of Status  Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)	

### MAILING ADDRESS:

TO:

Registration Section

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

### STREET/COURIER ADDRESS:

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

mrck Auto.	Sales LLC
(Name of the Limited Liability (A Florida I	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Co	mpany were filed on 6 12 2015 and assigned 257
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRI	2885 103 rd Otteof 32210
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre	ered office address on our records, enter the name of the new
Name of New Registered Agent:	trancique tantain
New Registered Office Address:	885 103rd Sheet  Enter Florida street address
	Chwill , Florida 32210

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 **Title Name** Type of Action □ Remove ☐ Change \_□ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

). If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	• . •
<u>Note</u>	etive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	1/28/16
	Signature of a member or authorized representative of a member
	Francique tantan Typed or printedname of signee

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Filing Fee: \$25.00