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SECRETARY OF STATE
THILDHIASSLE, FLOSIBA

D. SCOTT MAY 1 - 2017

COVER LETTER

Division of Cor			, I
SUBJECT: <u>Fas</u>	t Coast VW R	Sestorations, CCC	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	_ Fallon_	Taylor - Mack Name of Person	
	East Coast	VW Restoration Firm/Company	s, LC
	56 S. Dixie	HWY #15	
	St. Augusti	ne, FL 33084 City/State and Zip Code	
	eastcoastvwre E-mail address: (1	estorations e amai	1. Comparison)
For further information c	oncerning this matter, please ca	di:	
Same As Ab Name o	DON E f Person	at (904) 301-1 Area Code Daytime	Telephone Number TR 2
Enclosed is a check for the	ne following amount:		27日
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

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**

East Coast VW (Name of the Limit	Restorated Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Life Florida document number 1,15000113		were filed on 06 39 301	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of N/A The new name must be distinguishable and contain the w			
The new name must be distinguishable and contain the w	ords "Limited Liabili	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	NA	
(Principal office address MUST BE A STREE	T ADDRESS)	·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	N/A	
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	Tice address here		er the name of the new
	N/A		超 第 五
New Registered Office Address:		Enter Florida street address	27 LE
		, Florida	F. S. D
		City	Zip Code
New Registered Agent's Signature, if changing I	tegistered Agent:		貴州 る
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regibeing filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as p registered office	performance of my duties, and I ar provided for in Chapter 605, F.S. C	n familiar with and r, if this document is

Page 1 of 3

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 = Au	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Gary Mack	2407 Depen Street	Add
		2407 Depen Street Edgewater, CO 80014	Remove
			Change
			Remove
			Change
			□ Remove
			☐ Change
	·		Add
			□ Remove
		unid Targe	Change
			FILI PROPERTY.
			Remove
			Change
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			□ Remove
			□ Change

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s listed, the date in serted in this	must be specific s block does no	and cannot be at meet the a	pplicable stati	filing or more that	han 90 days afte	er filing.) Purso is date will n	not be listed a
ifies a delay	ved effective	e date hu	t not an efi	fective time	at 12•01	am onit	he earlier o
after the r	ecord is file	d.		July Line	, 00 12.01	~ 2	三 3
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						;	9
(Signature of	a member or	authorized rep	resentative of a	member		
	s listed, the date inserted in this tive date on the cifies a delay after the r	s listed, the date must be specific inserted in this block does not tive date on the Department of sifiles a delayed effective after the record is file	inserted in this block does not meet the a tive date on the Department of State's recifies a delayed effective date, buy after the record is filed. Signature of a member or	s listed, the date must be specific and cannot be prior to date of inserted in this block does not meet the applicable statutive date on the Department of State's records. cifies a delayed effective date, but not an effort after the record is filed.	is listed, the date must be specific and cannot be prior to date of filing or more dinserted in this block does not meet the applicable statutory filing receive date on the Department of State's records. Signature of a member or authorized representative of a	is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after inserted in this block does not meet the applicable statutory filing requirements, the tive date on the Department of State's records. Cifies a delayed effective date, but not an effective time, at 12:01 by after the record is filed.	s listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs inserted in this block does not meet the applicable statutory filing requirements, this date will retive date on the Department of State's records. Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00