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COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJ	ест:2	DOMECCAS LLC Name of Limi	ted Liability Company		
The er	closed Articles of	Amendment and fee(s) are subi	nitted for filing.		
Please	return all correspoi	ndence concerning this matter t	o the following:		
			Name of Person LLC Firm/Company		
		320 NW 171	St. Address		•
		Miami, F Elbro Cam E-mail address: (1)	I. 33169 City/State and Zip Code a.V. Com be used for future annual r	eport notification	on)
For fu	ther information co	oncerning this matter, please ca			
	Efcainn Name of	Brody Person	at (<u>347</u>) Area Code	325 - Daytime Tek	phone Number
Enclos	ed is a check for the	e following amount:			
√ \$2	5.00 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)

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**

2 Domes Cars, LLC (Name of the Limited Liability Compa (A Florida Limited I			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appe Jability Company	ars on our records.)	
The Articles of Organization for this Limited Liability Company		1 1	and assigned
Florida document number <u>L 15000 17579</u>		·	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company l	<u>nere</u> :	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the	designation "LEC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		 .	TECAL T
		.	5 5 T
Parkers and the state of the st			mg 55 Fm 参
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			A A A A A A A A A A A A A A A A A A A
B. If amending the registered agent and/or registered of	Fign addmoss o	n aun maanda anta	n the name of the new
registered agent and/or the new registered office address here		n our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Emer Fl	rida street address	
		, Florida _	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I haraby another the appointment of a soliton of a soliton of			

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records:</u>

MGR = Manager

AMBR = Authorized Member Title Address Type of Action Name Brody, Menachem M. 320 NW 171 st. - Add MGR Miami, Fl. 33169 □ Add ☐ Remove _□ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove _ Change □ Add _□ Remove _____ Change

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Effective date, if other than the	date of filin	ıg:			(optional)		
If an effective date is listed, the date mu Note: If the date inserted in this b	st be specific an	d cannot be pric	or to date of filin	g or more than 90 cfiling requirem	days after filing.) Purs	uant to 64 10t be li	05.0207 sted as
document's effective date on the I				,g	1		
he record specifies a delaye The 90th day after the rec			ot an effect	ive time, at :	12:01 a.m. on ti	ne ear	ner o
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Dated 08		201	<u>1</u> .				
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Filing Fee: \$25.00