U5001357AF-

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600283058566

03/10/16--01024--017 **25.00

TALLAHASSEE, FLORIDA

MAR 11 2016 S. YOUNG

COVER LETTER ...

TO: Registration Section Division of Corpora		
VW SAL SUBJECT:	E MASTER LLC	
	Name of Limited Liability Company	
The enclosed Articles of Ame	endment and fee(s) are submitted for filing.	
Please return all corresponder	nce concerning this matter to the following:	
	MARILU POU	
-	Name of Person	
	VW SALE MASTER LLC	
-	Firm/Company	Z ZZ
	18555 SW 42ND STREET	16 MAR 10
•	Address	10 V
	MIRAMAR, FL 33029	THE THE
-	City/State and Zip Code	
	VWSALEMASTER305@GMAIL.COM	3
	E-mail address: (to be used for future annual report notification)	
For further information conce	rning this matter, please call:	
MARILU POU	954 367-5642 at ()	
Name of Per		_

□ \$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

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

STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certificate of Status & Certified Copy

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VW SALE MASTER L			
(Name of the Limit	ed Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Li Florida document number L15000135795	ability Company were filed on 8 .	/10/2015	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability company ho	ere:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the d	lesignation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		<u> </u>
(Principal office address MUST BE A STREE	T ADDRESS)		SECRETY FALLAHA 16 MIR
Enter new mailing address, if applicable:			TARY OF
(Mailing address MAY BE A POST OFFICE)	<u> </u>		FLURID H 2: 31
B. If amending the registered agent and/ registered agent and/or the new registered of		our records, ent	er the name of the nev
Name of New Registered Agent:	MARILU POU		<u> </u>
New Registered Office Address:	11454 LAKEVIEW DR		
	Enter Flor	rida street address	
	CORAL SPRINGS	, Florida	33071
	City		Zip Code

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
AMBR	INES R PEREZ	6425 COW PEN ROAD UNIT P-11	
		MIAMI LAKES, FL 33014	■ Remove
			☐ Change
			□ Add
			□ Remove
	•		☐ Change
			SECRETA FALLAHA GARAN
		 	- Remove Topo
			— □ Change STA
			Add
			Remove
			☐ Change
			☐ Remove
			□ Change
			□ Add
			Remove
			☐ Change

					
		<u></u>			
					
					
	<u> </u>				
			÷		
					<u> </u>
	<u> </u>				16
		•			16 HAR
 			<u>. </u>		
					7
					.;
ffective date, if other than the d an effective date is listed, the date must by the late inserted in this bloc locument's effective date on the Dep	k does not meet t	he applicable s	of filing or more tha atutory filing requ	(optional) n 90 days after filing.) irements, this date v	Pursuant to 605.020 vill not be listed a
e record specifies a delayed of The 90th day after the recor		but not an	effective time,	at 12:01 a.m. c	on the earlier
Dated	, 20	16			
				ember	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00