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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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ETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corpora			
CHRISTS HE A have	had Maras	110	
SUBJECT: Neighbor	Name of Limit	led Liability Company	
The enclosed Articles of Ame	endment and fee(s) are subm	nitted for filing.	
Please return all corresponder	nce concerning this matter to	o the following:	
	Brooks GOLDON	\checkmark	
-	Brooks GOLDON	Name of Person	
	NE ishbon hand	MOTOUS / LC	
-	J. J	MOTOLS LLC Firm/Company	
	898 NOT. 30+	i Ct.	
-	898 N.J. 30+	Address	·
	MKIAND PARK. 7	4. 33334	
-	<u> </u>	City/State and Zip Code	
_	mrquidan 1981	City/State and Zip Code O 4 Myo. Com o be used for future annual report noti	
	E-mail address: (to	o be used for future annual report noti	fication)
For further information conce	rning this matter, please cal	11:	
BROOKS GOLDON		at (954) 599-3	542
Name of Per	son	Area Code Daytim	e Telephone Number
England is a shoot for the fo	Novino amounte		
Enclosed is a check for the fo	•	-	
\$25.00 Filing Fee	3 \$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**

NEIghbor hood Motors CCC			
Neigh Man hood Ma fors LCC (Name of the Limited Liability Compaint (A Florida Limited L	ny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company Florida document number 15600/69287	were filed on <u>/o/3</u>	1/16	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the design	ation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	SAD NE 30	k ct	
(Principal office address MUST BE A STREET ADDRESS)	SGS NE 30 Dakland PA	rk, 71. 3333	f
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		records, <u>enter th</u>	e name of the no
Name of New Registered Agent:	***************************************		
New Registered Office Address:	Enter Florida st	reet address	
	City	, Florida	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

Page 1 of 3

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>	<u>Address</u>	Type of Action
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		FT. LAUDERDALO, 71. 33312	E-Kemove
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ffective date, if other than the date of filing: (optional)	`				
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Page 3 of 3

Filing Fee: \$25.00