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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: (2000 (244 (CARS LCC ted Liability Company	
Name of Limit	ted Liability Company	_
The enclosed Articles of Amendment and fee(s) are subm	nitted for filing.	
Please return all correspondence concerning this matter t	o the following:	
John S	Name of Person	
	CARS; LLC.	TEATIASSEE FLORID
		SSE SE
8/112 5/	ABAL IN DUSTRIAL E	<u> 1</u> 00 로 뜻
		SSEE FLORIUS
TAMPA,	FL 33 Ce 19 City/State and Zip Code	_
	Onyround and Exp code	
E-mail address: (10	o be used for future annual report notification)	_
For further information concerning this matter, please ca	11:	
John Disbrow	at (8/3) 599 - 759	<u>/</u>
Name of Person	Area Code Daytime Telephone Num	iber
Enclosed is a check for the following amount: \$\sum_{200} \\$25.00 \text{ Filing Fee} \\$30.00 \text{ Filing Fee &}	□ \$55.00 Filing Fee & □ \$60.00	Filing Fee,
Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	friends fee, ficate of Status & fied Copy onal 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	d:
	Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co.	mpany as it now appears on our records.)	
(A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comparing Articles of Organization for this Limited Liability Comparing Comparin	any were filed on <u>O//c 8 / 2</u>	o) Cand assigned
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		= = = = = = = = = = = = = = = = = = = =
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	S CE
		7
		3 35 E
Enter new mailing address, if applicable:		= 1196
(Mailing address MAY BE A POST OFFICE BOX)		= 5
		으행되
The Late of the constitution of the constituti	3 .cc 13	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		nter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
	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 Name Type of Action **Title** <u>Address</u> KEUIN M. Young _ Add ☐ Remove ☑ Change □ Add □ Remove □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add

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	tive date, if other than the date of filing:(optional) (optional) Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.	.0207 (3)
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